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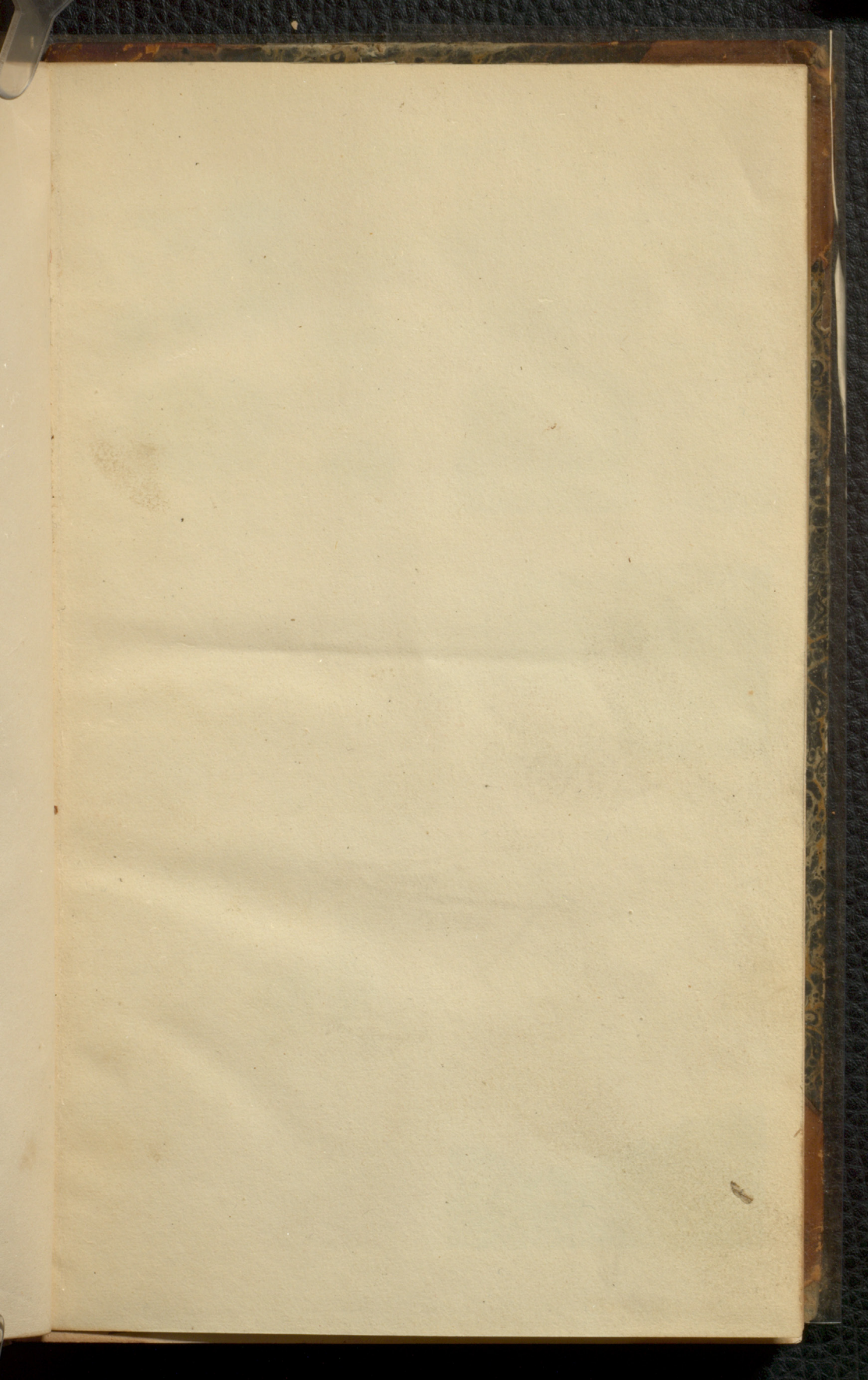


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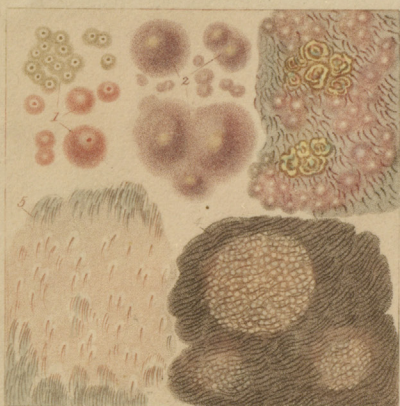
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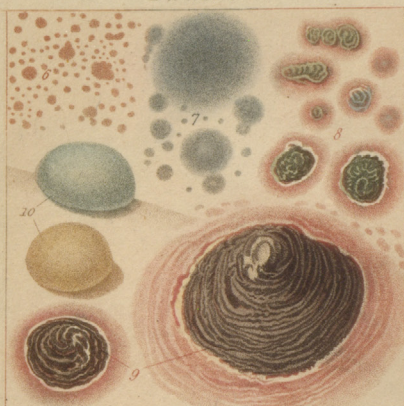


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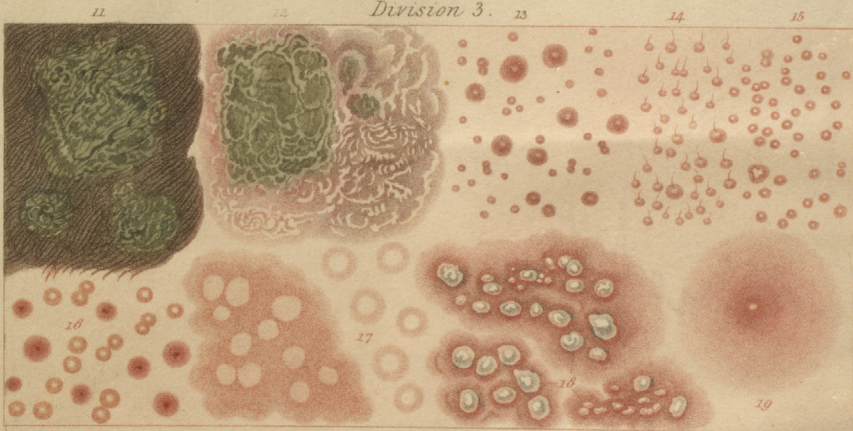
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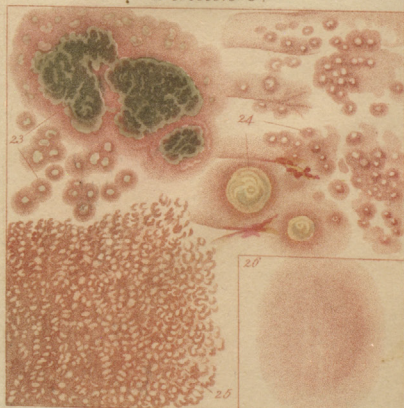
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PRACTICAL TREATISE

Medical ON *Faculty*

DISEASES OF THE SKIN,

McGill COMPREHENDING *University*

AN ACCOUNT OF SUCH FACTS AS HAVE BEEN RECORDED
ON THESE SUBJECTS,

WITH ORIGINAL OBSERVATIONS.

THE WHOLE ARRANGED WITH A VIEW TO ILLUSTRATE THE CON-
STITUTIONAL CAUSES OF THESE DISEASES, AS WELL
AS THEIR LOCAL CHARACTERS.

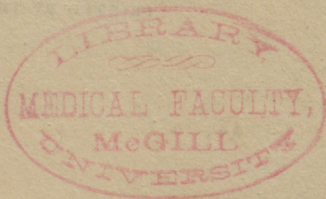
BY SAMUEL PLUMBE,

MEMBER OF THE ROYAL COLLEGE OF SURGEONS OF LONDON, OF
THE MEDICO-CHIRURGICAL SOCIETY, &c. &c.

LONDON:

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1824.



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TO

SIR ASTLEY P. COOPER, BART. F.R.S.

SURGEON TO THE KING, &c. &c. &c.

DEAR SIR,

It is with no small degree of pleasure that I seize the opportunity now presented, of expressing the sincere respect I entertain for that superiority of talents which has thrown so much additional lustre over the character of our profession, and for that urbanity and liberality which have invariably distinguished your conduct in every relation to society.

Permit me, my dear sir, to assure you, that though a part of the labours now presented

a 2

to you have received the honour of the approbation of the Royal College of Surgeons, I yet consider that they obtain no small accession of credit in the liberty you have allowed me of dedicating them to you.

With every feeling of gratitude for instructions long since received as a pupil, as well as for favours subsequently conferred in the prosecution of the arduous pursuits of life,

I subscribe myself,

Dear Sir,

Your much obliged

and obedient Servant,

SAMUEL PLUMBE.

65, Great Russell-street, Bloomsbury,

May 1, 1824.

PREFACE.

IN the arrangement of the subjects of the following pages, I have endeavoured to obviate inconveniences which have been complained of in classifications founded merely on local character, and though it would be almost impossible so to construct one as completely to comprehend both the local characters and constitutional causes under precise definitions, I think that in a large proportion of the divisions which I have instituted, a step of some utility towards this point has been achieved. In the arrangement of the substance of the work I have found much advantage, both as regards the convenience of description and the conciseness

which it was desirable to observe, in order to escape the imputation which has been incurred by other authors on these subjects, of introducing unnecessary and useless matter.

Viewing the study of cutaneous diseases as in its infancy, for I am not disposed to admit that the inquiries and researches of Dr. Willan among the writings of ancient authors has elicited any useful information, it has appeared a point of no small importance to steer as widely as possible of those numerous divisions into species where slight variations only exist, and those endless distinctions without real differences, which have been made by this author, as being calculated to discourage the student rather than promote the knowledge of the subject. The object chiefly in view in the classification I have adopted, namely perspicuity, is also much forwarded by this step, while no useful fact is forgotten, or any important principle of treatment overlooked. I have endeavoured, not-

withstanding, to point out the foundations on which the distinctions in question have been raised, as well as the causes of such trifling variations as have appeared to others to render them necessary. Abbreviation of remark, so far as it could be observed without the sacrifice of any important consideration, and an arrangement of the engravings calculated to convey clear ideas of the different diseases in one plate, have been had recourse to, with a view to escape a serious obstacle to the propagation of the knowledge of these subjects, among persons whose pecuniary means of obtaining information are at all limited.

Since the remarks on the anatomy and physiology of the skin, contained in the first sheet of the following work, have been sent to press, Mr. Chevalier has published his Lectures on this subject, delivered before the College of Surgeons. With every degree of deference to this scientific surgeon's opinions generally, I feel it would be impossible, with

justice to myself, to omit to notice a few remarks contained in his publication, connected with, and militating somewhat against that pathology of certain diseases which I have endeavoured to establish at the expense of much time and attentive observation.

It is generally admitted, that in the use of microscopic instruments, deceptive appearances have been often made the groundwork of fallacious theories and descriptions, and sometimes even of notions so fantastical and extravagant, as to bring down the shafts of satire and ridicule on a science dignified by the strongest claims to the respect and gratitude of mankind. It is not at present certain to what extent a magnifying apparatus of extraordinary power can be depended on for conveying correct impressions; and hence, in the perusal of observations stated to have been made by such means, we are naturally compelled to exercise more distrust than as regards such as have been made by the unassisted sense.

Mr. C., by the use of such means, has discovered a distribution of glands between the cuticle and rete mucosum, or, as he prefers designating this structure, the second epidermis, as well as a second order of the same kind between the latter and the cutis. If the first of these really exist, the merit of the discovery unquestionably belongs to Mr. C.; but having, at the same time, pointed out the second arrangement alluded to under the rete mucosum, it seems difficult to form a conjecture as to the utility of the first. They are denominated, with the intention of conveying an idea of their offices, sebaceous or ceraceous glands.

While, however, such descriptions have been given, of parts hitherto not known to exist, it is singular, that an apparatus obvious to the naked eye, and performing a most important part of the offices vested in the skin, on the proper discharge of the duties of which the glossy shining appearance of the latter

in health entirely depends, while on its derangement a varied form of disease immediately makes its appearance, has obtained but little attention. This apparatus has been described in the first sheet of the following production, under the name of sebaceous follicles; and notwithstanding the description of the glands in question, I am still of opinion that these follicles are the only organs producing sebaceous matter. Nor is it difficult, with such a view of the subject, to understand the real nature of those little white pearly prominences described by Mr. C. as glands, and illustrated by a preparation deposited in the College Museum. These appearances are familiar to every one, as occurring on and about the tip and alæ of the nose in young infants, in considerable numbers, and I have described them in adults, in the following work, under the head of Acne*. They have always appeared to me to be concretions of

* Page 22.

sebaceous matter on the mouths of the follicles, retained in that situation by the cuticle: the latter being at this precise point impervious. Of course the cuticle peels off on maceration, leaving them undisturbed, and this is the fact which the preparation I have alluded to shows in a most unequivocal manner. Many of these specks are already detached and floating loose in the spirit, which is an occurrence that would not have so soon taken place, had they been what Mr. C. supposes.

Another assertion of Mr. C., regarding the origin of the hair, appears to me equally demanding some comment. It would be superfluous to observe, that I am not actuated by a spirit of criticism, merely, in such remarks as I may offer; for on this point it necessarily happens that if Mr. C.'s opinions be correct, a different one long since published by me, and which I have been accustomed to consider subsequent observation as constantly confirming, must be

wrong. It does not require any argument to prove that the hair does *not*, as Mr. C. asserts, "grow from small bulbs imbedded in the surface of the corium;" because the fact of its origin below the inner surface of this structure is rendered sufficiently evident by a very simple procedure, which I have described*; and is furthermore amply illustrated by several preparations made by Mr. Hunter, now in the College Museum. The reader will readily see the necessity of this observation, from its intimate connexion with the pathology of several important cutaneous diseases.

On the subject of the existence of the rete mucosum, as a membrane, Mr. C.'s opinions are opposed to those of the authors whom I have alluded to in the first page of the following treatise; but as no reason exists for importantly connecting this substance with any cutaneous disease, it does not, in this place, form a proper subject for further remark.

* Page 8.

I have omitted the consideration of the various congenital malformations of parts of the cutis denominated nevi materni, partly because they cannot be considered with propriety as diseases of this structure, and partly because those only which are capable of improvement by medicinal management, or require removal by surgical interference, have obtained the notice of the first surgical authorities. I am not aware that any thing has been added to the information contained in the works of Mr. Abernethy* and Mr. John Bell†, as to the best method of treatment of such cases as have been termed by the latter aneurism by anastomosis, and which constitute by far the larger portion of those to which the attention of the surgeon is required to be directed.

* Abernethy's Surgical Works, vol. ii.

† Principles of Surgery, vol. i.

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ERRATA.

Page 26, line 17, *for remote, read minute.*

30, 6, *for is, read are.*

30, 18, *for mente, read menti.*

57, 7, *for differ, read differs.*

159, 4, *for lichen, read lichen, &c.*

216, 23, *for pustules, read pimples.*

275, 12, *for scarletina, anginosa, read scarlatina anginosa.*

276, 5, *for Dr., read Mr. Pearson.*

298, 4, *for gyzata, read gyrata.*

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DESCRIPTION OF THE PLATE.

DIVISION I.

FIG. 1.—The upper part of this cluster of figures is intended to represent the uninflamed follicle; the lower the commencement and progress of inflammation, and its termination in the formation of matter.—2. The enlarged and indurated tubercles (*A. indurata*), with matter formed in their centre, which occur in bad constitutions.—3. Inflamed and suppurated follicles, forming sycosis on the beard.—4. The appearance of spots of *Porrigo scutulata*, where no fluid secretion or scab has been formed.—5. The partially denuded scalp of long established cases of the latter, where scabs have been allowed to accumulate, where great irritation prevails, the remaining hairs insulated by pustules.

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FIG. 6.—*Petechiæ*, or *Purpura simplex*.—7. The enlarged spots of *Purpura hemorrhagica*.—8. Different stages or degrees of the *Ecthymatous* eruption.—9. The conical scabs of *Rupia*. The similarity of character between the two latter is rendered very distinct.—10. *Pompholyx*. The superior vesicle discoloured by the admixture of blood from the vessels of the surface.

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FIG. 11.—*Porrigo favosa*.—12. *P. larvalis*, both from cases of considerable standing.—13. The pimples of infants, some of them surrounded by considerable inflammation; their repre-

sensation in clusters connected by patches of inflamed skin (*S. intertinctus*, &c.) has been omitted.—14 and 15. The pimples of adults, termed Lichen; the first of these, as it sometimes occurs on the arms and other parts covered by the finer kind of hair, each hair occupying the centre of a pimple: the second as it appears on other parts.—16. The pimples of Prurigo, the tops of some of them scratched off, leaving a peculiar little, black, bloody scab on their apices.—17. Two of the commoner forms of Urticaria.—18. The vesicles of Herpes in an advanced and partly flaccid state.—19. The carbuncular Furuncle.

DIVISION IV.

FIG. 20.—The two inferior spots representing the first appearance of the spots of *Lepra* before the first scale separates. The superior, large, round, and scaly; the disease in a spreading state.—21. *Psoriasis*.—22. An enlarged representation of the morbid and discoloured cuticle forming *Ichthyosis*. The numberless fissures caused by the cracking of this hard dry substance, and dividing it into thousands of pieces, are well represented.

DIVISION V.

FIG. 23.—The inferior portion exhibiting an enlarged view of the vesicles of *Impetigo*. The superior, the disease in an advanced stage, with the scab partially covering it.—24. The vesicles and enlarged pustules of the itch.—25. The appearance of the skin in *Eczema mercuriale*.—26. The tubercle of *Erythema nodosum*.

PRELIMINARY REMARKS

ON THE

ANATOMY AND PHYSIOLOGY OF THE SKIN.

THE absence of due consideration of the anatomy and physiology of the skin, which a large portion of those who have written on the subject of cutaneous diseases have manifested, as well in their descriptions as methods of treatment, renders it absolutely necessary, in a work professing to consider such diseases generally, to introduce the following remarks. The singular circumstances, that the most distinguished authors on dermoid pathology have boldly fixed the seat of some of the most important and obstinate diseases in parts of the skin denied by equally distinguished anatomists, to have any existence in reality*; that whole

* According to Alibert, the seat of tinea is in the rete mucosum: a substance which Mr. Lawrence and others never

pages have been wasted in the description of affections obviously depending on derangement of a well-known function of the skin, without the slightest reference to such function, or the part of the skin on which it depends, appears to me to afford proofs of the deficiency alluded to, and no unreasonable hopes, at the same time, that a constant attention and frequent reference to such points, is calculated to disclose important facts in the pathology and treatment of such diseases which have been hitherto overlooked.

The skin has been usually described, since the time of Malpighi, as consisting of three parts, or layers, of differently formed substance; the cuticle, cutis, and an intermediate thin web-like membrane, which this anatomist thought he had discovered; the corpus, or rete mucosum, and which has been described, though not satisfactorily demonstrated, by

could find in the white subject, and which Dr. Gordon denies the existence of, except in blacks. In my Essay on Porriço, I had occasion to express a similar opinion with the last distinguished anatomist on this subject, without however having at that time read his uncompleted System of Anatomy, to which I refer. This supposed membrane may perhaps be nothing more than a portion of the inner surface of the cuticle, even where it is found. We shall probably have this matter cleared up in the forthcoming work of Mr. Chevalier.

succeeding anatomists up to the present period.

Of the cuticle, an insensible structure, extended with different degrees of thickness over every part of the surface of the body, it is unnecessary to say more in description, than that it is the production of the superficial vessels of the cutis, or true skin; and that its office is to protect the delicate and highly sensible surface of the latter: that it is rendered porous for the purpose of giving passage to the perspiration to the surface, though its pores do not admit of satisfactory demonstration, and that it is perforated in many parts to give passage to the secretion of the sebaceous follicles to its surface.

Under circumstances of disease, this substance gives an external distinguishing character to many cutaneous affections; different degrees, merely of morbidly, increased action, of the vessels producing it, forming the points of distinction between the genera of the whole order Squamæ of Willan, from common dandriff to the fish-skin disease.

The cutis, on the vascular energies of which the production and nourishment of the cuticle depends, besides its more obvious and general offices as a covering to other parts, and as the structure effecting the separation of the per-

spirable matter from the mass of blood, gives in different parts of the body a seat to a most important structural arrangement, on the disorder of which some of the most obstinate cutaneous affections are found to depend:—the sebaceous follicles. These follicles are minute thimble-like depressions in the substance of the cutis. The larger kind are most numerous distributed over parts much exposed, and where flexures of the skin are formed; the secretion poured out in the former instance, probably forming a defence to the cuticle, under exposure to heat; and in the latter, operating to prevent the consequences of attrition. They are most easily distinguishable about the nose and mouth in men, as well as in females; but in the latter, they are also often seen in great numbers on the neck and upper parts of the chest: their secretion, which is entirely supplied by the vessels of the cutis, gives an agreeably smooth and glossy appearance to the skin of these parts, where their dimensions and number are not very considerable; but where the reverse is the case, the secretion at their orifices becomes discoloured, forming so many minute black spots, which much disfigures these parts, and gives them a dingy, unhealthy appearance.

In the existence of papillæ on the skin in

any part of the body, except those wherein the senses of taste and touch reside, and where their utility is obvious, as giving a much greater field for the extension of the nerves of such senses, and increasing their acuteness, I disbelieve altogether. I have never been able, by any glasses which could be depended on, to discover any vestige of them: it is needless to add, that that pathology which has been given us of the formation of papulæ or pimples, is incorrect*, since every genus of this order makes its appearance on all parts of the body at times, *except* where papillæ are really and easily found.

Another point in the anatomy of the skin, which importantly regards some cutaneous affections, relates to the origin and growth of the hair. On the deficiency of observation on this part of my subject, I am led to believe the opinion of the obstinate and almost incurable character of some of the species of porrigo, has been entirely raised; since, by constantly bearing in mind this fact, and the application of a few common and well-known surgical principles, to be hereafter more par-

* Papulæ, or pimples, appear to originate in an inflammation of the papillæ of the skin, by which these are enlarged, elevated, and indurated. Bateman's Synopsis.

ticularly alluded to, these diseases are now easily subdued.

In the consideration of the structure and peculiarities of the scalp as connected with the diseases of this part, I am not unaware that I have been preceded in some of the opinions I have to give, some time since: and that by an author, who evinces more of the spirit of reasoning, likely to lead to good results, as regards the managements of cutaneous diseases generally, than most others whom I have been led to consult*.

An anatomical description of these parts has been given in the work to which I allude, which appears to be sufficiently minute to answer the purpose for which it was intended; but as a difference of opinion exists between the author and myself on some essential points regarding the pathology of the disease on which he has written, I shall take leave to offer another, somewhat more minute, but necessary to the understanding of the true characters of such disease, and the causes of its usual obstinacy.

The greater degree of thickness and density of the scalp and other parts covered by the stronger kind of hair, would lead us, *a priori*,

* Cooke on Ringworm.

to suspect that they had other offices to perform beyond those of the skin in other parts of the body. Did it not appear that the cutis, in such parts, had no connection with the bulbous roots of the hair, we should probably assign to it, as others have done, part of the office of producing and nourishing the latter: there can be no doubt, however, that the hairs have their origin completely beneath the under surface of the cutis, and derive their support immediately from the adipose membrane here disposed and apparently having a particular arrangement for this purpose.

The layer of adipose membrane, extended with different degrees of thickness on the inner surface of the cutis on different parts of the body, assumes under the scalp a material change of character. It is closely attached to the cutis, and on superficial examination, appears partially interwoven with the inner surface of this covering. It is firmly attached also to the bulbs of the hair, which seem to be implanted in it.

The loose reticular membrane distributed on the head between this structure and the pericranium appears to answer a purpose, with respect to it, very similar to one of those of the pia mater with the brain; and if the mi-

nuteness of the dissection does not deceive us, it sends off processes which dip down into, and divide the adipose structure into portions having a rounded capsular form; in the centre of each of which, three, four, or more hairs, appear to originate. Be this as it may, however, the origin of the hair in this structure, and its complete independence of the cutis, as regards its nourishment, is made sufficiently obvious, by an incision of a portion of the scalp previously removed from the head, just through the dense structure of the cutis, and the turning one portion back on the other.

The cutis therefore, a vascular and highly sensible structure, is penetrated by the hair, which does not, as far as the most minute injections, with the help of glasses, can show, receive any contribution of vessels for the purposes of nourishment from it: and if there is any analogy between the structure of the human hair, and that of the larger species of animals; the oleaginous secretion covering it, and giving to it its smooth and glossy appearance, is also derived from the adipose structure alluded to beneath the cutis; this fluid being conveyed along the centre of the hair by tubes which originate in the bulb.

From a little above the bulb, as it passes up through the scalp, each hair is seen to receive an opaque membranous covering, forming a kind of sheath; which sheath can be easily traced to the surface of the scalp and a little above it; appearing at this part as if formed by a process sent off from the cuticle. In minutely injected preparations, vessels may be seen passing on these sheaths, and originating in the adipose capsules, having no other obvious use than the support of the sheath and the hair it contains.

The fact that the scalp is pierced by the hair, and has little or no share in its production or nourishment, I am particularly desirous of impressing upon the attention of my readers. Reasoning from analogy, we should be justified by this consideration only, in concluding that the latter *may* possess, when the former is in a state of disease, all the properties of extraneous substances. As regards the common ringworm of this part, it will be uniformly found evincing these characteristics in the mildest as well as most severe forms of the disease.

It may be needless to remark, that, with the exceptions mentioned in the foregoing description, the component parts of the scalp are the same as those of the common cover-

ing of the body elsewhere; that closely in contact with, extended over, and attached to the adipose structure described, from which the nourishment of the hair is derived, the same sensible and highly vascular cutis exists; and that the same insensible structure, the cuticle, is extended over all: and it will be obvious enough, hereafter, that we are not pursuing an idle or unpromising path of inquiry in searching for the causes of the peculiar obstinacy of disease, in those circumstances which we know to be peculiar to the part in which it occurs*.

From the foregoing statement, no doubt will be entertained of the correctness of the opinion of an author to whom I have already alluded; "that the vessels which form the cuticle, and those which supply the secreting capsule of the bulbs of the hair, are not the same;" indeed it must be obvious at once, that the structure of the hair requires, in its formation, an arrangement of vessels materially different from that producing a substance so entirely dissimilar to it as the cuticle.

Thus the offices of the skin, with which its

* I take it for granted that ringworm of the scalp may be considered as the most obstinate of cutaneous diseases (not having a constitutional origin or connexion) with which we are at present acquainted.

diseases are most immediately concerned, are,
1. Secretion of the perspiratory fluid. 2. The production and nourishment of the cuticle. 3. The supply of the sebaceous follicles and secretion of their contents. 4. The support of the sheaths of the hair; having, as will appear from the foregoing observations, nothing to do with the nourishment of the hair itself.

Besides the diseases which form the subjects of the following pages, the skin is subject to deviations from its natural colour, unattended with organic affection of the part. The most common of these is that which follows the long continued internal employment of nitrate of silver; a medicine which, of late years, has grown into extensive use in epilepsy. This effect of the medicine in question was first observed by Fourcroy, and subsequently by the author of a paper in the 5th volume of the Medical Repository. In a very large number of cases recorded since that period, the same effect has followed the same treatment of the disease, though happily attended with relief to the patient, from the terrific attacks of the latter*.

* I am aware that the opinion of the dependence of the discoloration alluded to on the internal use of this medicine,

With respect to the manner in which this discoloration is effected, the opinion of M. Buttini, of Geneva *, seems to have been the first published. The seat of it has been fixed, like that of porrigo, in the rete mucosum ; but the last mentioned author has doubts whether this or the cutis itself receives the stain. "He imagines it possible that, as bile, albumen, and many other animal fluids, precipitate nitrate of silver, the colouring matter is carried through the circulation, not in the state of the nitrate, but in that of the oxide." Another explanation is as follows: "In some particular states of the constitution, there is probably more than the usual quantity of muriate of soda evolved in the secreted fluid thrown off by transpiration from the rete mucosum ; and the nitrate being carried there by the blood in the course of the circulation, is decomposed and changed into muriate of silver: the muriate being insoluble, it is probably not again taken up by the absorbents, and as it accumulates, suffers its usual

has been questioned: upon no other authority, however, than the fact, that it did not follow in a stated case the exhibition of 187 grains in 56 days. It is also acknowledged in the case in question, that frequent purging occurred while it was under exhibition. Vide Edinb. Med. and Sur. Journ. vol. 5.

* De usu interno preparationum argenti.

change of colour from the action of light *.” The latter explanation may be almost considered satisfactory, when the fact, that the blue colour of the skin produced by this medicine, is evidently darker, in all cases, in parts exposed to the action of light than in others not so situated, is taken into consideration †.

Other cases are on record of even greater discolorations than the foregoing. In such instances the system has been stated to have become affected by mercury during the rubbing in of sulphur ointment for the cure of the itch; a chemical change having been effected by the union of the two substances in the mass of circulating fluids. This kind of colour does not, like the former, continue for any length of time, but disappears on the discontinuance of the medicine.

Mental impressions of a violent character have proved, now and then, equal to the

* Editors of Med. Repos. vol. 7, p. 15.

† It is a curious fact, first recorded, I believe, by Dr. Badeley, that the application of a blister, in such cases, is followed by a white skin: the blue colour entirely disappearing. This change, however, does not, as he supposes, follow the use of a blister in people of colour, for the spot to which it is applied, becomes even darker than others after healing. After the punishment of flogging also, unless the skin has been completely cut through and destroyed, the colour becomes much darker.

effecting a total change of the colour of the skin; cases of which, from black to white, and the reverse*, have been respectably attested and recorded in periodical works very lately. It is probable, however, that the *modus operandi* of such a cause must remain involved in obscurity.

I shall pass over the consideration of the discoloration of jaundice, as arising from causes forming no part of the subject of the following lines, but as regards that which attends yellow fever, and which has been till lately uniformly considered as depending on absorption of bile; I shall notice some published observations in a future page, which have been considered likely to lead to a different conclusion.

* Med. Repos. Dec. 1822. Med. et Phys. Journ. Nov. 1819.

SECTION I.

CHAPTER I.

On diseases which obtain their distinguishing characteristics from local peculiarities of the skin.

UNDER this denomination I purpose to consider the varieties of acne and sycosis, as well as the different species of porrigo; the two former depending on obstruction of the sebaceous follicles, while the pustules of the latter, as will be shown hereafter, may be with propriety considered as the result of the local irritation of the hair.

ACNE.

THE different forms or stages in which this disease has been noticed, have led preceding authors to speak of four varieties, under the titles of acne simplex, punctata,

indurata, and rosacea*: but the necessity of this division is rendered very questionable, when it is considered that the circumstances on which it is founded are for the most part unimportant and accidental, and in a great measure produced entirely by the ordinary progress of inflammation, and the degree of activity or the reverse, which such inflammation may assume.

It essentially consists in its original form of simple obstruction to the free passage of the sebaceous matter to the surface of the skin, by which a considerable degree of hardening of that substance is produced, as well as accumulation. The necessary result of such accumulation, in the course of time, is, the distension of the follicles in which it is contained, and their consequent inflammation.

When the attention is first directed to follicular obstruction, the forehead, or temples, or parts of the face about the nose, are occupied by a number of little hard inflamed tubercles (*acne simplex*), usually exceedingly tender to the touch, interspersed with minute black specks (*acne punctata*), the former being formed of the inflamed and thickened follicle with its contents; the latter, of the discoloured

* Bateman's Delineations.

sebaceous matter occupying its orifice. The skins of different individuals differ greatly in the number, as well as size of the sebaceous follicles; and hence, in a state of health, the complexions of some are said to be more clear than that of others, the copious distribution of the black spots giving a dirty and less healthy appearance to the part, while their minuteness in size and numbers leave the agreeableness of the red and white unimpaired. It is evident, however, that the simple appearance of such spots ought not to be considered as a disease, or as in any respect a deviation from a state of health; and that the only desirable change which can be effected, where they exist to an unpleasant extent, is that which frequent ablution and moderate friction can produce.

A constant attention to these latter points will usually prevent, where the skin is not very thickly furnished with follicles, any discoloration of the kind described; but the whole contents of the follicle, should this not be sufficient, may be easily squeezed out with a moderate degree of force, in a manner familiar to all. As a matter of precaution, this latter step ought to be followed with respect to all such follicles as may exhibit the blackened surface described, where others

are in a state of inflammation, as a preventive measure. The worm-like substance which the contents of the follicles produce by this operation is easily wiped away without the use of any kind of instrument.

It is under circumstances of actual and long continued obstruction only, that the treatment of this affection comes under the notice of the medical practitioner; the inflammation of the follicle, with its accompanying tenderness on pressure, and redness, first directing the attention of the patient to it. The immediate exciting cause of this inflammation is usually found to depend on some accidental disorder of the *primæ viæ*, the hardness of the contents of the follicle, and apparent obstruction, frequently existing for some time without the excitement of mischief, till such obvious disorder occurs. Hence, instead of the solitary appearance of one of the tubercles here and there, on distant parts of the face, a considerable number, though not very thickly distributed, are observed simultaneously on the forehead, sides of the nose, chin, &c. There is great difference in the period elapsing between the commencement of the inflammation of different follicles, and its termination in suppuration; and consequently many of them are seen apparently

only slightly inflamed, and presenting to the touch the resemblance of a small millet seed under the cuticle; while others are actually suppurated. It is not correct, however, as far as I have observed, that inflammation, as alleged by Willan and Bateman, when once begun, ever terminates in resolution; for each tubercle thus formed, if punctured with a lancet when assuming an appearance of subsiding, is found to contain matter: the orifice of the follicle is closed at the commencement of the inflammatory action, and if the latter has been less violent than usual, the quantity of pus produced does not lead to the rupture of the superincumbent structure, and absorption, more or less speedily, takes place. In the case of an extensive affection of this kind, many tubercles are found in the state described, gradually subsiding without the appearance of matter on their apices: where, however, the latter makes its way to the surface, a few hours only elapse, before it is discharged, and the only vestige remaining a day or two after, is merely a bluish red speck, which rapidly disappears. A minute scab, probably, for the first forty-eight hours, may be found covering this: these are intermixed with a considerable number of the

reddened tubercles before mentioned, and the blackened orifices of a larger portion of the uninflamed follicles *. In most instances, when inflammation in the follicle begins, the orifice of the latter is soon closed up by the attendant tumefaction, and the blackened speck disappears; but it sometimes happens, that the latter is observed in the centre of the pustule, in which case, the sebaceous matter is surrounded by pus, and eventually discharged with it; still, however, retaining its solid form, though insulated in this manner, when it is easily detected by rubbing the contents of the pustule between the finger and thumb.

It has been constantly observed, that persons of a sanguine temperament and florid complexion have been most subject to follicular inflammation; and among these that young men between the ages of twenty and twenty-five have been the greatest sufferers from it. Females, at the same age, are also subjects in whom its visitations are not un-

* A very good, though much enlarged view of the simple distended follicle with the discoloured contents, mixed with others containing matter, is given by Dr. Bateman, Delin. 62. of *Acne Punctata Simplex*.

frequently manifested; but in the latter, it rarely proceeds with such rapidity to supuration, or produces such unpleasant appearances as to extent. On the contrary, from the absence in a great measure of those exciting causes which difference in the habit of living produces in the male sex, females, particularly of pale complexions and lax fibre, are more often seen with a really considerably enlarged state of the follicles, without a vestige of inflammation.

Independent of the disposition to this affection which the habit of living may generate, some individuals are peculiarly disposed to it from original formation of skin, and hence has arisen the idea of its hereditary character. In such cases as I have had an opportunity of noticing, particularly where the parents of those affected had been formerly sufferers, I have entertained no doubt, that not only a free determination to the skin marked by florid complexion existed, and contributed largely to the materials of inflammation, but that the number and size of the follicles were considerably less than in subjects where the disease did not occur; but it is not to be expected that we shall always find an obvious cause either in this formation

of skin, or in disorder of the digestive organs, for every obstructed or suppurating follicle which may be noticed.

In the skins of some individuals, small pearl-like tubercles are observed, here and there distributed, in parts where the follicles are most numerous. This appearance arises from the deficiency of any opening in the cuticle, corresponding to the orifice of the follicles in the cutis; the contents of the follicles being thus retained at its orifice. The description of vitiligo, in the Synopsis of Bateman, is in some respects exceedingly applicable to this state of parts, and it is not improbable, that the latter has given rise to the idea of such a disease as vitiligo: the tubercles I have described, however, seldom attain the size of a wart, as stated in the latter affection, nor are productive, if occurring on the scalp, of any serious mischief to the hair. They now and then suppurate, but sometimes remain stationary for a considerable period, and ultimately disappear by absorption.

When disorder of the digestive organs has been the immediate exciting cause of acne, the symptoms of the first affection are alleviated, and there is no doubt that more formidable mischief is sometimes prevented

by its occurrence: in the treatment of the mild and transient kind described, therefore, the state of these organs and the general condition of the system ought to occupy the chief attention: not so much, however, from the fear of doing mischief by sedative applications in repelling the eruption, but as leading to the most direct remedial measure. Repellents, as they have been termed, seldom have any effect in preventing suppuration, and this ought to be considered the most desirable course it should take. Frequent bathing the parts with warm water, and gentle friction with the mildest kind of soap, constitutes by far the best kind of local application, its effect being at once to allay irritation, and promote suppuration, and at the same time to remove any accumulation in the follicles of the part as yet uninflamed.

The use of stimulants, except in the old established and indurated state of this affection (of which we shall have to speak hereafter) as practised by the ancients, and approved by Dr. Bateman, is obviously improper, because in opposition to the first principles of surgery; for it requires no argumentative reasoning to prove that such applications will not prevent the suppuration of the follicle, or that

such suppuration is the most speedy and safe termination to which it can be conducted. Indeed the use of stimulants seems to have occurred to the writers alluded to, only as being preferable to sedatives, repellents, or such applications, as by checking the determination to the cutaneous surface may endanger parts of more importance. They are capable, however, of adding much to the irritation and extent of the disease, and consequently of protracting its duration and course, while the plan which conducts the tubercles to a safe and healthy suppuration is at once conformable to the obvious indications of nature, least painful to the patient, and free from danger of the supposed prejudicial effects of sedatives.

It may be not improper to notice here the recommendation of blistering, alluded to by Dr. Bateman, and originating, I believe, with Darwin. I entertain not the slightest doubt of its immediate effect in putting a stop to the disease; the mouths of the obstructed follicles are at once cleared by the vesication, and their contents loosened and easily got rid of, while the inflammation in each particular follicle is checked by the counter-irritation produced on the surface in its neighbourhood;

but it is a remedy unnecessarily severe, and exceedingly inconvenient.

The constitutional disposition often manifested in young men is generally found to depend on a plethoric state of system, and as it is obvious that this condition would lead to the production of a thicker and more adhesive formation of the sebaceous matter, another useful indication in the constitutional treatment is deduced*.

It has been observed that these affections are usually of too trifling a character, except in females, to induce persons affected to take professional advice; and, perhaps, there is but too much truth in this opinion, when it is considered that, if neglected, the disease is capable, by frequently repeated attacks, of establishing itself in a chronic form; for then, at all events, it has an unpleasant appearance, and is attended by much uneasiness; on both of which accounts a person may very well stand excused for attempting to obtain relief without incurring the imputation of too great

* Dr. Underwood prescribed internally the carbonate of soda, and Dr. Willan the oxymuriatic acid; but without attention to the local treatment surgically, these medicines could have had little effect.

anxiety about personal appearance. With respect to females, I believe the feeling respecting it is pretty much the same as that of the Roman ladies in the time of Celsus, who observes, that on their accounts only, he thought it necessary to mention remedies.

The foregoing remarks apply more particularly to the states and consequences of obstruction of the sebaceous follicles, denominated acne simplex and acne punctata. When the disease occurs more extensively, and habitual disorder of the digestive organs, or scrofulous diathesis exist, a slow and unhealthy suppuration takes place, spreading from the originally inflamed follicle, and involving to a considerable extent those in the neighbourhood, producing, instead of a remote pustule, a considerable, though slowly formed, collection of matter. The latter, instead of finding its way quickly to the surface, accumulates and disorders the substance of the cutis to a great extent. Its course and extent is marked during the more active state of the inflammation by a florid looking and very irregularly formed, rather prominent, tubercle, exceedingly tender to the touch, and in some one or two points soft: still the superincumbent skin is not ruptured, and in the

course of a short time it assumes a dark-blue colour. In this state it sometimes comes under the notice of the surgeon, when the existence of matter being ascertained, a lancet is thrust into it, and the contents discharged, leaving for some time an unhealthy livid edge to the orifice, which slowly heals, and, in most instances, leaves a mark of some duration on the part. If neglected beyond a certain extent, however, and this course is not taken, the matter is either absorbed in the most sluggish and protracted manner, or a small portion remains to find its way through the skin, leaving a more minute sore, which soon dries up; a blue discoloration of the spot sometimes remaining for months.

I believe this state of the affection, as represented by Dr. Bateman in his plate of *acne indurata*, to be in all cases the result of established disorder of the stomach and bowels, or of scrofulous diathesis. Where the latter did not manifestly exist, the former seemed to have been very frequently aggravated by the greatest inattention either to the quantity or quality of the aliment received.

From the more extended character of the inflammation, doubts may at first sight be reasonably entertained as to the analogy of

this species with the first mentioned; in other words, as to its origin in the follicles of the skin. The identity of these affections are, however, sufficiently manifested where a minute examination is instituted in any case of extensive mischief, for the incipient inflammation of single follicles is in such cases almost constantly found intermixed with the larger tubercles formed of inflamed clusters. No other eruption, moreover, ever assumes in the remotest manner an approximation in appearance to this affection, and is at the same time confined, as this is, to parts where the follicles are more particularly distributed*.

As in the former cases, the first appearance, different stages of the progress, and final termination of the disease, are often seen co-existent on the face, neck, and breast of the same individual, and generally also a considerable number of enlarged and distended, though uninflamed, follicles of the acne punctata.

In the common treatment of this affection, it is lamentable to witness the complete deficiency of attention to common surgical prin-

* Vide the description of Dr. Bateman.

ciples, and though it is noticed by the author, whose works I have so much referred to, that local treatment forms a great portion of what is necessary to be attended to, no notice is taken of any particular application beyond those of a generally stimulating character. It is clear, from the most superficial observation, that a disease, consisting in its origin of active inflammation, and in its progress of those variations only which particular constitutions or states of system originate previous to final suppuration, can rarely, if ever, require local stimulants; and in this particular affection, I have no doubt that such applications, before the matter has been discharged from the tubercle, are highly improper. If any vestige of active inflammation remain, it should be soothed, and suppuration promoted by poultices and fomentations; and if any tubercle should be found assuming the blue colour without signs of matter coming forward, it should be freely punctured. As in the case to which I formerly alluded of simple healthy inflammation of the follicle, where the orifice had been obliterated by the inflammation, and no external appearance but that of a minute tubercle existed, suppuration will, in almost all cases, be found effected, and the cure will

follow infinitely more rapidly than where stimulants only are relied on.

The contents of each tubercle being evacuated, and the temporary additional irritation which the puncture excites having subsided, the use of stimulants is plainly indicated. The absorbent vessels is capable of producing a very considerable effect on the thickened and discoloured cutis of the part in a very short period, even unexcited; but a very manifest advantage, notwithstanding, usually follows the employment of spirituous lotions. The oxym. hydr. dissolved in proof spirit, in the proportion of five grains to eight ounces, with which the spots are lightly sponged, seems to be entitled to a preference over other formulæ as lotions; but if made of greater strength it frequently irritates the skin. Were it not for the unpleasantness of the application, the mercurial ointment would answer the purpose by far better than any thing else. In severe cases it may be safely depended on for doing all which any application is capable of.

With regard to the constitutional treatment necessary, in all such cases as have come under my notice, the tonic plan seemed to be called for, and was followed, in conjunction

with the local management detailed, by pretty uniformly successful results. The history of the patient usually disclosed a disposition to voracity, with little anxiety at any time by what species of food gratification was to be obtained. A furred, yellow tongue, offensive breath, frequent heat and feverishness, with considerable languor at intervals, and irregularity of bowels, seemed to have been the consequences which, however, with the exception of some debility, were speedily removed by a short alterative course of medicine. A plethoric state of system, with a generally healthy condition, is, I believe, incompatible with this affection altogether.

Sometimes the extent of the mischiefs of follicular obstruction and inflammation is confined to the tip of the nose, producing a considerable enlargement of these parts, and, perhaps, of all deviations from health to which the human frame is liable, this is one which obtains the least commiseration. The general impression is, that it is the offspring of what is commonly called good living, and in the only case which I have met with, where hard drinking did not form a part of the habits of the patient, an extraordinary appetite, not of the most delicate kind, was well known to exist.

It would not appear to deserve a separate consideration from the preceding, but from the circumstance of its limited extent and very constant dependence on the habits alluded to. From the latter fact it has been frequently considered an indication of diseased liver: affections of this organ, however, of a tuberculated character, the known usual consequence of dram drinking, are by far more frequently unaccompanied with the slightest disposition to this deformity; while persons in the possession of what they consider unimpaired health, enjoying better appetites for food, and exhibiting fewer indications of general disorder than falls to the lot of those who labour under hepatic derangement, generally become the subjects of its most aggravated forms. It is a state of the disease, moreover, rarely indeed seen in that class of society where indulgence in the use of spirituous liquors to the most deleterious extent is quite common, to the exclusion of necessary portions of good animal food.

The chronic inflammatory redness and enlargement of the nose, which constitutes the state of *acne rosacea*, the affection under consideration, is always the result of repeated attacks, or of long continuation of the obstructed state of the follicles, the direct

exciting cause being an overloaded state of the stomach, and frequent excessive and general excitement of the digestive organs. There seems to be a satisfactory explanation of the disease being first found to attack the nose, in the fact, that the follicles are here very thickly distributed, while it is more exposed to the chilling effects of cold, and consequently more frequently to the effects of reaction: constant checks being thereby afforded to the healthy progress of suppuration, as well as means of increasing and extending the inflammation.

From the operation of these causes, collections of matter, equal in extent to the space occupied by three or four follicles, are frequently concealed under a smooth red tubercle for weeks, its existence under such tubercle not being suspected. As the disease advances, and the exciting causes arising out of the habits of the subject are still kept up, others are formed in the same way, which, now and then, as in the common indurated state, proceed to suppuration, leaving half the dimensions of the tubercle existing, which, perhaps, never is entirely removed by the absorbents. From the protracted duration of the complaint, and the succession of the phenomena detailed, in every part of the tip

and *alæ nasi*, the irregular tuberculated nose is at length fully formed, and every thing like follicular organization is completely destroyed. The usual secretions of the part are thus prevented, and, consequently, the turgescence is increased, and confirmed chronic inflammation takes place, which nothing but a plan of living diametrically opposed to that previously followed, affords any hope of repairing.

A minute examination of the spot, when the disease first makes its appearance, will usually enable us to detect a state of parts where the puncture of a lancet is called for: minute collections of matter may be in this way discharged from the centre of apparently incipient tubercles, and the thickening of the skin will often in this state rapidly disappear, if purgatives to a small extent and attention to diet are had recourse to at the same time. Emollient applications may be employed with advantage for some time; and when the florid redness begins to be followed by marks of diminished energy in the vessels of the parts, the stimulant plan may be adopted with final success.

In my original essay submitted to the attention of the College, I alluded to the practice of a surgeon in the habit of advertising his success in affections of the kind under

consideration, and I stated my belief that the practice in question consisted of the liberal use of friction by means of soft brushes to the part, assisted by soap and warm water. It is certain that this treatment is capable of producing a great diminution of the tumefaction and redness, and of bringing about a more healthy state of parts; and in some cases in which I have been led to prescribe it, a few days under its use have disclosed pretty considerable collections of matter, which have been speedily discharged, and followed by importantly beneficial alterations in the appearance and size of the part. It seems that a more healthy stimulus is thus given to the spot, and suppuration effectually promoted by the friction, while the attendant irritation is subdued by the use of warm water as a fomentation; the adjoining follicles being, as before stated, kept from accumulation and obstruction. Having their secretion thus going on freely and copiously, they still further assist in relieving the turgescence of the part.

The most obvious symptom of disordered state of the stomach prevailing in this affection is acidity, and a great opinion has accordingly been entertained of the use of

alkaline medicines ; but it must be sufficiently clear, that unless the patient can be prevailed on to correct the habits on which such acidity or other disorder depends, little ultimate good is to be obtained.

It would be improper to pass over this part of my subject without noticing the occasional excessive dilatation and growth of obstructed follicles, where inflammatory action and supuration do not take place. The formation of atheromatous tumours, first, I believe, noticed by Sir A. Cooper, as dependent on follicular obstruction, is unquestionably the result of the absence of excitement in the follicle when first distension is effected ; and if inflammatory action does not happen to occur at this period, an encysted tumour of small extent is formed, and continues to grow, the follicle appearing, after distension to a certain extent, to lose its susceptibility. I have extirpated a considerable number of these tumours, and have invariably found their contents to be precisely the same as the sebaceous matter of the follicles ; while the cyst, as it has been termed, which contains it, exhibits no greater difference from the delicate membrane lining the parietes of the follicle in a healthy state than is common with other

membranes under circumstances of disease. Extirpation is, of course, the only remedy for tumours of this description.

CHAPTER II.

On Sycosis.

THE intimate analogy of sycosis to the different forms of acne has been alluded to by Bateman; but the points of resemblance or dissimilitude have been passed over without notice. The truth is, that what has been termed sycosis, is nothing more or less than acne or follicular obstruction occurring on parts covered by hair; and certainly, though the necessity of distinction between it and follicular obstruction in parts not so covered be admitted, it cannot justify a subdivision like that adopted by preceding authors of sycosis *mente capilitii*, &c.

When affections of the cutis, no matter of what kind, occur on parts which are covered by hair, such affection almost invariably assumes a more obstinate and formidable character; indeed, the peculiarities of most of the common affections of the scalp, as will be

shown in the following lines, depend on the local irritation of the hair.

The part occupied by the beard is generally pretty well supplied with the sebaceous follicles, and these are of course equally liable to disorder with those in other parts of the skin from constitutional causes. When, however, any accidental cause brings on inflammation and disorder in them, the peculiarity of their situation abounds with impediments to its termination in the most desirable manner. The mouth of the inflamed follicle and the adjacent cutis is penetrated by hair, and the violence inflicted by frequent shaving makes every individual hair a powerful mean of adding to the mischief. If a disposition in the inflammation of the follicle to subside may exist, the influence of the operation of shaving is sufficiently great to prevent it, and to hurry on the inflammatory action to the suppurative process. If many tubercles are formed, it is capable of increasing their size, and extending the inflammation to the adjoining follicles. I believe these effects of the operation of shaving are manifested in every case of the disease, and it will be easily understood why it should be so, when the fact that the inflamed part is penetrated by a substance like the hair, and that the latter is violently

stretched upon and through it by the use of the razor, is borne in mind.

From the local influence of the hair on the inflamed spot where it penetrates the cutis alluded to, which will be more fully elucidated in the following chapter, a secretion of pus is formed around many of them, the hair being situated in its centre, and these pustules intermixed with the tubercles formed by the inflamed follicles, some of which are also showing matter on their apices, make up the external characters of the disease. The same phenomena are also observed when it occurs on the scalp; the extraction of single hairs here and there forming orifices by which the contents of a pustule is readily discharged. As in common acne, if a lancet be thrust into the tubercles of sycosis (which is advisable where one or more hairs are not distinctly seen growing in it), matter will certainly be found, and a rapid subsidence of the inflammation follow; where hairs can be pulled out in the way mentioned, however, the evacuation of the matter is accomplished by gently squeezing the tubercle, without having recourse to the lancet.

From what has been said, it will appear that the existence of hair on the part, and its consequences in aggravating the inflammation,

form the only difference between sycosis and acne; and where the hair can be extracted without pain, this step should not be neglected in commencing the treatment of the former. After this, emollients and applications tending to promote suppuration and allay irritation are the best, no more good being to be expected from sedative washes or stimulants, than in the treatment of the subjects of the preceding chapter.

The constitutional part of the treatment of sycosis has been already detailed; the same general remarks on this point applying equally to it and to acne. The attention to the part should be constant and unremitting, and should consist of warm fomentations frequently repeated during the day, with poultices if they can be conveniently applied at night. Every little tubercle should be punctured at its first commencement, and every hair extracted from the part which may be got out without much pain. This practice, strictly followed up, is capable of removing the most protracted and troublesome cases without the use of any internal medicines beyond alterative aperients*, and any dependence on internal remedies, unassisted by

* The internal remedies recommended by Willan, Bate-man, and Allbert, consist of general alteratives and tonics.

it, will inevitably lead to disappointment. The impossibility of paying the due regard to cleanliness and comfort without shaving, when the disease occurs on the beard, renders this operation, though painful and irritating, unavoidable; the pain attending it, however, is soon allayed by bathing the part with warm water.

CHAPTER III.

On Porrigo.

UNDER the general denomination of porrigo, three essentially different affections have been classed by Willan and Bateman, and the species, according to their classification, amount in number to six*. The first and last of these cannot be separated by any line of distinction founded on correct pathology; and with respect to what has been termed porrigo decalvans, which consists in the mere falling off of the hair, leaving a bare scalp without the vestige of inflammatory action upon it, it is scarcely necessary to observe, that it merited a separate inquiry.

* P. Larvalis, Furfurans, Lupinosa, Scutulata, Decalvans, Favosa.

The *P. Scutulata*, or common ringworm, may be with propriety considered as only the commencement of that disease which, under circumstances of great neglect, answers to the description of *P. Furfurans* and *P. Lupinosa*. In the middle and higher classes of society, indeed, the latter states of the affection are never seen; for nothing but gross inattention to cleanliness can, of course, admit of the accumulation of that mass of dried scabs and diseased secretions, which forms their distinguishing features.

On these accounts it becomes a matter of propriety to consider the investigation of the pathology of *Porrigo Scutulata*, as demanding our first attention.

The symptom by which this disease is usually first discovered, is the falling off of the hair of the part. The attention being attracted by this occurrence, the scalp appears, on examination, to have assumed a somewhat scurfy and slightly reddened appearance. The hair remaining on the diseased part, is thin and irregularly scattered over it, the greater portion appearing to have been removed by the roots, while some have been broken off near to the scalp, the roots of which still retain their situation. Those which remain apparently growing on the part, will be found to

drop off on friction, or to have, on being pulled, scarce any hold on the scalp.

In the majority of cases at their first commencement, these will be the only appearances noticed. The existence of the minute straw-coloured pustules, denominated *achores*, does not appear necessary to constitute the disease, as they are not seen for a short time later, and not till after some degree of itching and irritation of the part has been felt.

The itching and irritation commencing simultaneously with the formation of pustules, the child who is the subject of the disease soon ruptures a few of them, and spreading, by the frequently repeated application of the nails to the spot, their contents over the adjacent parts of the scalp, extends the mischief with great rapidity upon it; the same destruction of the hair, and subsequent pustulation, marking its progress.

When pustules are noticed, they are uniformly found with hairs growing through them; and if the disease has existed for a considerable length of time, and destroyed the greater part of the hair of the part, such pustules are found proportionately reduced in number; but still surrounding the few straggling hairs which remain; each single

minute pustule appearing to be dependant on the hair in its centre.

If the hair, as sometimes happens, be completely eradicated from the spot where the disease first appears, the skin assumes an apparently healthy character; the disease, as regards this particular spot, may be said to have exhausted itself.

In traversing the other parts of the scalp, however, the power of infection being kept up by the secretion of the pustules of such parts, till the new hair again appears in the original situation of the disease, a recurrence of the pustules takes place here, and the same destruction of the new hair is observed, as of the old.

The foregoing may be considered a correct description of the disease, and with the exception of the statement of the existence of pustules at its commencement, is, in substance, what has been given us by Dr. Willan and others. The specific irritation constituting its essence, is correctly described by that author, as diffused in a circular areola, on the spot to which the infectious matter is first applied. In the rapid extension of the mischief, after pustulation has commenced, the same figure is preserved, or pretty nearly so;

the contents of the pustules on the margin, being constantly distributed over the adjacent healthy scalp, by the rupture of the cuticle covering them, in the act of scratching the spot; or by the natural discharge of it, when the process of pustulation is complete.

That the disease, when once formed on the spot, spreads only beyond a very small extent by the application of the infectious matter, and not from the mere communication of the specific action of the vessels of the part to those adjoining, is an important fact in its pathology and treatment, to which I shall have frequently to refer. If a doubt can be entertained on this point, in the mind of any candid inquirer, a minute attention to a single case, will be sufficient to remove it; and if its correctness be admitted, it will be obvious, that the present routine of management as regards applications to the part, is the most inefficient and futile that can well be conceived.

There is no necessity to descend to minute particulars, to establish conviction on this point, for it is clear, that applications to the part, whether sedative or stimulant, astringent or otherwise, if they do not possess the power of taking from the matter secreted, by decomposition or other means, the power of

infection, must be utterly inefficacious, if not, (as many kinds of them certainly are), highly prejudicial. The common attentions of a cleanly nurse are infinitely more effectual, and that for obvious reasons, in this hitherto terrible complaint, than any medicinal application whatever, where cleanliness is neglected; and those which have been found the most effectual, or have contributed in any degree to expedite the cure, certainly act pretty much in the same way, as the diligent use of the domestic materials such descriptions of persons are accustomed to employ, in washing the children's heads—that is, they remove the infectious matter or render it inert.

The ringworm of the scalp may be identified with a cutaneous disease, commonly similarly named, and occurring on the skin in other parts of the body. It is necessary to observe, that I am not alluding to the herpetic disease sometimes so called, or to the *Impetigo Figurata*, each of which obtain the appellation, from the form in which they spread, as well as the disease in question. When that disease occurs on which I have made this observation, it does not often show the pustules of the one, and never the vesicles or tetter of the other; but is usually marked

by a lightish redness of the spot, and slight exfoliations of the cuticle. The centre of the patch appears to have lost the greater part of this covering; while a morbid accumulation of it, marks the extension and line of margin of the disease*. Sometimes, minute pustules occur, and some itching and tingling of the part; other spots of the same kind are then seen in the neighbourhood; but if left undisturbed, it appears to exhaust itself and die away. The use of the ung. hydr. nitr. diluted, is beneficial in this case; as it has appeared to me, by readily mixing with the irritating secretions, when rubbing it on the part, and depriving them of their contagious properties.

Among the various diseases to which the skin is liable, there is none which excites more interest, than Ringworm appearing on

* A case of this affection lately came under my notice, where the disease first appearing on the arm of a lady, the mother of several children, seemed evidently to have been carried from thence, to the heads of two little girls, who had the common ringworm of the scalp shortly after, with its usual features, destruction of the hair, and subsequent formation of pustules. Both children recovered by the pursuit of the plan of treatment, detailed in the following pages. Several instances of a similar kind have since come under my notice, which leave no doubt of the identity of the two affections.

the scalp. Notwithstanding the experience we have had of its incapability, where a strict attention to cleanliness is observed, of producing any permanently serious mischief to the part, the same alarm still occurs on its appearance, whether in public seminaries, or private families. Where nothing certain is known as to the probable time of continuance, and most correct methods of treatment of any disease, some degree of apprehension must of course occur, and such apprehension receives little diminution in the mother's mind in this case, when she finds the professional advice relied on, perhaps with much confidence in other cases, confined merely to directions how to protect the rest of her family from its infection.

The statements which have been handed down to us, of its effects in altering the colour and strength of the hair, afterwards growing on the part when the disease has subsided, are not at all calculated to diminish this alarm, though as completely contradicted by daily experience, at the present period, as any hasty deduction founded on slight observation can possibly be. Whatever effect may be produced on the hair growing on the part at the time of the occurrence of the disease, the structure secreting the hair is

not affected by it; and when the former has been subdued, or, more properly speaking, allowed to exhaust itself, the hair will grow strong and healthy as ever. It is, of course, not meant to be asserted here, that the new hair will at once spring up of the same shade and strength as the original, but that after being once or twice shaved, it exhibits no difference whatever. When extensive ulceration of the scalp has been produced by mismanagement and neglect, the case is materially altered. Then the production of new hair will, of course, depend on the degree of mischief which the part secreting it has sustained.

These, however, are cases not met with in decent society; they are indeed only seen among collections of paupers, and the patients of public charitable institutions.

When the secretion from the pustules is allowed to accumulate, scabs are formed of it upon the surface; which being confined by their adhesion to the remaining hairs, become the means of further accumulation of this irritating fluid. The inflammatory action of the part, materially increased in this way, the quantity of fluid secreted, and the means of extension of the disease, receive likewise a proportionate increase; and it is this state

of the disease, which appears to be understood by the term Scalled head. The pain and irritation experienced under these circumstances, with the extreme tenderness of the part, render the patients very averse to any of the usual applications. In a still more aggravated form of the disease, the accumulation of scabs, the offensiveness of the odour of the part, and the myriads of pediculi creeping over it, render it so disgusting, as to discourage, very commonly, any earnest attempts at relief; and the patient, (generally, as I have observed, moving in the very lower ranks in life), is abandoned to the ravages of the disease*.

In the description of Dr. Willan, of the progress of the affection in a less formidable and advanced stage, the complete extirpation of the hair is stated to be followed by the return of the natural colour and appearance of the scalp†. A remark which appears to have been made without exciting the sus-

* I believe this state of the affection to be what is generally understood by the term Scalled head, though the accumulation of the secretions of *P. Favosa* has at least an equal claim to such a designation.

† As soon as the extirpation of the hair is completed, the scalp, though partially much denuded, re-assumes its natural colour and appearance. Vide Willan on Porrigo, edited by Mr. A. Smith.

picion, that the hair, while it remained, had any share in keeping up the disease. While, however, we see this state of things constantly occurring where complete extirpation of the hair has been effected, and daily experience the recurrence of fresh patches of pustules, while any remain in other cases, or perhaps on the same head, we are fully justified in such a suspicion; and it is further warranted by other circumstances which I shall have to mention hereafter.

It has been already remarked, that the pustules are uniformly having a hair growing in their centre, and this observation appears to have influenced a writer on the diseases of children, many years since, in the assertion, that the disease commences in the roots of the hair *. Mr. Luxmore, also, in a pamphlet published in 1810, entertains the same opinion. I think myself justified, however, in pronouncing these to be *mere* opinions, and however probable their correctness may appear at first sight, they are such as will never be supported by the result of more minute examination of the origin and progress of the disease.

* Underwood on the Disorders of Childhood, adapted to domestic use, vol. ii. page 3.

The latter author observes, "that the disease consists of a chronic inflammation productive of matter, peculiar in its nature, and capable of propagating the complaint, if applied to the scalp of a healthy subject, as much as Syphilis or any other specific disease. If applied to other parts of the body, it produces a similar disease, allowing for the difference of structure of those parts; and which is generally known under the name of Ring-worm."

I may take the liberty to observe, also, that the plan of treatment which this author appears to have adopted with much success will, in the majority of cases, whether in their incipient states, or more confirmed forms, be found entirely inadequate to the production of any good effect on the disease. Even in those cases which occur, where the most decided marks of scrofulous diathesis prevail, it is much to be doubted whether constitutional remedies have the slightest influence in its cure; and, at the present day, little doubt can be entertained of the fact of its being merely a local affection, in the original production of which, the constitution has little or nothing to do. As to its mode of extension by contagion, still less hesitation must be felt in acknowledging its complete

independence of constitutional causes, as it runs, in a very short space of time, through whole schools of children; alike affecting those of the most robust and decidedly healthy habits, with those of an opposite condition.

It is with a considerable degree of diffidence that I have made the preceding remark on Dr. Underwood's opinion, as to the origin of the disease in the roots of the hair. The opinions of such a man, founded, as they are even when erroneous, upon actual attentive observation of disease, must command respect and attention; and the practice he recommends in this, notwithstanding its indiscriminate condemnation by later authors, I have no hesitation in pronouncing to be founded on the best and soundest of principles. Deficiency of minute research in disease will often beget erroneous principles of treatment. The incorrectness of such principles is soon disclosed in extensive fields of practice, when they, and the treatment founded on them, give place to mere trials, without principle, of multitudes of different remedies or applications. Such a field during an active and well spent life was always open to the respected character to whom I allude; and whether ignorant or not, of the

direct principle upon which the pitch cap and other depilatories acted in this disease, it is to be presumed that he had often been a witness of their good effects in its management.

I am not, by these remarks, desirous of advocating the use of such barbarous methods of practice as the pitch cap appears to be a part of, though they may be founded on a good principle; because such principle is abused at the same time as it is partially carried into effect. The removal of the hair by the roots, where the pustules of the disease have loosened them, is a measure, as I shall show hereafter, absolutely necessary to the speedily checking it; but it is obvious enough that the forcibly drawing off the pitch cap must equally draw up the roots of the sound hair to which it is attached on the adjacent parts.

A great difference of opinion seems to be entertained by different authors, as to the occasional origin of *Porrigo Scutulata*, from long protracted *Pityriasis*, and other furfureaceous and scaly diseases of the scalp. The very positive manner in which the possibility even of such origin has been denied by some, is calculated to establish a considerable degree of confidence in their opinion. On the other

hand, however, it must be acknowledged, that we are often seeing them co-existent on the same head, and find on inquiry, that the scurf had existed some time previous to the falling off of the hair.

If *P. Scutulata* originated in the bulbs of the hair, as has been maintained, it is apprehended that we should have pustulation in all cases, at their earliest periods of appearance; since it is difficult to conceive that the excitement of the disease from the application of matter to the skin should at once evince itself in the roots of the hair, (apparently cutting off their nourishment, and causing them to drop off), without a decided suppurative action having here been produced. That pustules do *not* appear when the hair *begins* to fall off, I may adduce as a proof, therefore, that it is not here that the disease originates. This peculiar feature, the falling off of the hair, is much more easily and satisfactorily explained, by referring it to the influence of the same principle on which its separation after *Scarlatina*, and other eruptive diseases, appears to depend; and which in submitting my ideas of the true pathology of the disease, I shall endeavour more particularly to explain.

In the description with which the present chapter commenced, I have endeavoured to convey a correct idea of the characters of what is exclusively called Ringworm of the scalp by some, and by others pronounced to be Scalled head. The latter term appears to have been sometimes indiscriminately bestowed on the Porrigo Favosa, and different stages of *P. Scutulata*.

For the purposes of distinction and successful treatment, it is highly necessary that some settled and distinct meaning should be affixed to these terms. In pronouncing after the example of some authors, the favous species to be Scalled head, we should convey an impression to the generality of practitioners, very materially different from what is intended; for, as has been already observed, the favous disease has none of the obstinate features of the *Scutulata*, and the application of the proper principles of treatment of this latter, to the management of the former, would be found utterly impracticable.

In suggesting the restriction of the term Scalled head to the advanced stages of *P. Scutulata*, I am persuaded that a better understanding of the disease and its treatment will be thus obtained; for while so much doubt and uncertainty is experienced as to

this point—where two importantly different diseases are confounded together, the proper treatment of which differ as widely as their characteristic features, successful practice can never be expected.

The very material points in which the P. Favosa differ from the subject of our present consideration, may be seen by referring to the chapter on that subject. The more copious exudation of fluid, and consequent formation of scabs, may appear to give it a superior title to the epithet Scalled head when occurring on this part. Though equally contagious, however, from the application of the matter secreted, its very frequent spontaneous termination, and other important characteristics to which I have alluded, make it quite a different disease from what is *commonly* understood by this term; the idea generally attached to it being that of a tedious and obstinate disease, which destroys the hair, is seldom removed by any topical application, and rarely, if ever, known to terminate of its own accord: a disease, in fact, precisely answering to the character of the advanced states of P. Scutulata.

Notwithstanding the absence of that copious exudation of fluid, even in the most

advanced stages of the Scutulata, which marks the favous species, and the existence of many other very important differences in the two diseases, the same methods of treatment are still inculcated, by the majority of those who have preceded me, as applicable to both. It is much to be regretted that medical men, taking on themselves the characters of authors, will continue to propagate ideas unsupported by actual attentive observation of the diseases on which they write, as guides for their professional brethren. Such practices are capable of producing incalculable mischiefs; and in the case in question, a man who placed confidence in the information derived from books, would be led to the adoption of measures productive only of confusion to himself and mischief to his patient.

In discussing diseases, the true pathology of which appears to be so little known, we should, in justice to the science of which we are members, attach no more importance to any particular remedy, than we feel ourselves, by the result of real practical experiment, conscientiously justified in giving it. Were this principle strictly adhered to, we should hear less of most important improvements, of

decided specifics, than we are now accustomed to; and the same methods of treatment of the P. Scutulata and Favosa would find but few advocates.

In our preceding pages, an attempt has been made to describe the milder and less advanced stages of the P. Scutulata, as well as allusions to some of its effects, when suffered to pursue its ravages unmolested. The different gradations between the former of these, and that represented in plate 2, must be very numerous: the one description is applicable to the disease, where attention to cleanliness effectually prevents any lodgment of the diseased secretion on the parts, and where it receives no accession of strength from collateral circumstances; the other, to that state which never occurs, *without* the full influence of all such circumstances having been exerted for a very considerable length of time. Irregular rugged layers of scabs, swarming with vermin, forming, at once, a complete barrier to any application calculated to check the mischief going on beneath, and a shield to protect and retain the irritating secretions on the spot, and furnish more copious means of its extension, invariably characterise this state of matters, as it has fallen under my notice: and such were the appear-

ances in that case, from which the plate referred to was taken *.

In cases much less advanced than is represented in this plate, however, an effectual check seems occasionally to be produced, to the extension of the disease on sound parts, by the excessive excitement of that originally affected. Where the diseased surface is very considerable in extent, of long standing, and in a very irritable state, the application of the matter to a sound part of the same scalp has often failed to produce the disease, while the same experiment on a healthy scalp with the same matter, *has* been followed by this effect.

In a foregoing page, I have taken the liberty to question the correctness of the opinion of the origin of the P. Scutulata in the bulbs of the hair, and have adduced the remark, that their separation frequently

* The appearance and apparent structure of the scabs of the parts seem to have been the chief points intended to be represented, in the plates of those who have preceded me. I have, however, considered it more essential to show, as near as may be, the disease itself, rather than the form its secretions assume, when left to dry on the part. A very active degree of inflammation of every portion of the diseased surface is here endeavoured to be represented, as well as the same distinguishing feature of it existing in its earliest period, namely, the formation of pustules round the hair.

occurs, without having a pustule surrounding them. It also frequently happens where no pustules are to be discovered, that they separate without having their bulbs attached to them; their extremities appearing to be broken off, or as if the process of their secretion had been suddenly stopped: whilst in other cases, the hair may be frequently drawn out, where the pustule is fully formed, with the bulb having its regular healthy dark coloured appearance.

Whatever difference of opinion I may have entertained on this particular point, as to the seat of the disease at its origin, I have already stated my idea, that the hair is still exercising a great influence in keeping it up, when once established; and though I am not prepared to deny the possibility of the occurrence of pustules where no hairs exist, experience warrants the assertion, that they are, in most cases, produced by the irritation, which the presence of the hair, situated in the already diseased skin, is calculated to excite. Several, and indeed most authors who have preceded me in the description of the disease, have noticed the fact of its cessation on spots where the hair has been eradicated. So far, the above assertion is somewhat supported,

and I may further observe, that the application of the contents of the pustules to the skin of other parts, though sometimes producing an affection resembling that described in a preceding page, yet have I never seen any thing like a pustule following it, except when such part was thickly covered with the finer kind of hair, when some little moisture has been now and then observed.

Much light may be thrown on the pathology of this affection, by reference to the known effects of the severe forms of Scarlatina on the skin, as well as of other diseases attended by determination to this part. In this disease, where excessive excitement of the surface prevails through its course, its termination is attended by extensive exfoliations of the cuticle, and, occasionally, by the separation of the hair of the scalp; which two circumstances appear to depend on the same cause,—the excessive action of the vessels of the cutis. This action, of which those vessels partake which secrete the cuticle, produces a morbid increase of this structure; while the privation of blood, which, (during the continuation of the inflammatory state of the cutis), the structure secreting the hair sustains, cutting off its nourishment, the latter is ob-

served to drop off, apparently by the roots, though if examined, never having its rounded healthy bulbs. The same privation of nourishment which the structure secreting the hair suffers in the extended inflammation of Scarlatina, is experienced in an aggravated degree, in the smaller space which Ringworm commonly makes its appearance on; and hence it is, that the hair separates in this disease, without the formation of pustules: the determination of blood to the cutis depriving the structure secreting the hair of the proper quantity of this fluid necessary to the healthy performance of its functions.

In Ringworm it also not unfrequently occurs, that those vessels of the cutis which are destined to secrete the cuticle perform such office with a similarly excited action; and hence that scurfy state of the part generally found to exist, when the disease is first discovered.

In simple Pityriasis, or Dandriff, the character of which affection is marked by accumulation of scurf, that portion of the vessels of the cutis only, producing the cuticle, seems to be under the influence of disordered action; no active inflammation of the solid structure of the cutis usually attending it.

The successful treatment of Ringworm will materially depend on considering the destruction of the hair of the spot on which it makes its first appearance, as a necessary consequence of the disease. Any anxiety to preserve this, if influencing us in the measures we adopt, would most probably be prejudicial, and tend to retard the cure rather than expedite it. I believe this to be a remark generally applicable, and if there is any truth in the idea that the hair exerts a prejudicial influence in increasing the excitement of the disease, in the formation of pustules, and consequent increase of the means of its extension, the necessity of attending to it will be sufficiently obvious.

The scurfy state of the skin where Ringworm exists, contributes very frequently to prevent the discovery of the disease; and in the majority of cases this morbid accumulation of cuticle, unless carefully removed, will likewise conceal that actively inflamed state of the cutis constituting its essence. If the precaution of completely removing it be taken, however, no ordinary degree of redness and heat of the part is manifested; which if known to have existed for any length of time, may be considered quite a sufficient explana-

tion of the falling off of the hair, upon the principle above stated.

The separation of the hair being thus explained, the cause of the frequent occurrence of pustulation will be better understood. The disease may be defined to be inflammation of a specific character, affecting the solid structure of the cutis. It will be recollected, that pustules only occur where hair exists, and that each pustule has usually one in its centre: and bearing in mind what has been already stated, as to the probable influence of the hair on the scalp, where the cutis is actively inflamed, we may be warranted in the conclusion, that the specific irritation of the disease obtains an accession of strength from the local influence of the hair, where it penetrates the scalp; and that the formation of a pustule is the consequence of such accession.

While, however, on any single diseased spot, some hairs, apparently growing from a healthy root, (and on being torn up evincing all the appearances of a healthy bulb,) are surrounded by a pustule, many, around which no pustule appears, are either dropping off, or separate without the employment of the slightest degree of force.

We must not expect a return to health of

the seat of the pustule, in the first of these cases, without the separation of the hair in its centre; for after a careful attention with good glasses to this point, I am persuaded that if it remains any length of time, it produces on a minute scale all the effects of an extraneous substance, and that it separates at last. In the latter, it will be obvious, that the suffering the ends of the hair to remain sticking in the skin can only be productive of mischief in the same way, by increasing the irritation of the disease.

In those cases of the disease where no pustules occur, the power of extension is necessarily more limited than it would otherwise be: the single spot of disease first appearing, continues to enlarge in a circular form, and is not followed by the appearance of others on distant parts of the scalp so frequently as in the former case. There is always some degree of secretion of fluid, even in the latter, which has been called the dry species, and on the proportion of this, the degree of rapidity of its extension appears to depend.

In the progress of many cases of Ringworm, where accidental disorder of stomach may occur, where improper and stimulating applications have been had recourse to, or where a great susceptibility to irritation of

the skin exists, crops of pustules sometimes make their appearance, materially different from those constituting the original disease. They usually extend in a circular form round the original seat of mischief, and are accompanied by a highly inflamed state of scalp, with much itching and irritation. The extraction of the hair, where these latter exist, is unnecessary and impracticable. Poultices and sedative applications quickly subdue the irritation on which they depend, and are followed by a quiet, unirritated state of the part; the pustules quickly disappearing, and leaving only a little branny scurf on the skin where they were situated.

TREATMENT OF RINGWORM.

The failure of most of the applications which have been commonly recommended, has been witnessed, perhaps, by almost every member of the profession, who has seen any thing of the disease*.

* It would be useless to trouble the reader with the detail of the particular effects of the infinite supposed remedies, which, from time to time, have been earnestly recommended; for the majority of the best informed practitioners of the present day will be disposed to attach equal importance to them all; experience having taught them, that none have uniformly succeeded in producing a cure, or even temporary

Whatever may be the opinion among the profession generally, as to the necessity of a

alleviation. As a matter of curiosity, however, it may be as well to enumerate them ; and it may happen that some future cases, under particular circumstances, may be benefited by their use.

The ung. flor. zinci—ointment of the *coccus indicus*, in the proportion of two drams of the powdered berry to an ounce of lard—equal parts of sulphur ointment and soft soap intimately mixed, and used as soap in washing—ung. hydr.—ung. hydr. nitr.—ung. hydr. nitrico oxyd.—tar and sulphur ointments—ung. acidi nitrosi—lotions of solution of potash and of muriatic acid—ointment of calomel, acetate of lead and opium, of hellebore, turpentine, mustard, stavesacre, black pepper, capsicum, galls, rue, &c. Lotions of sulphate of zinc and copper—of oxymuriate of mercury, and of argenti nitras. The application of tinct. ferri mur.—blisters.

The whole of the foregoing have been noticed by Willan and Bateman ; and Alibert seems to have a decided predilection for sulphur, both externally and internally, in this, as well as in all other cutaneous diseases.

In the fourth vol. of the *Med. Repository*, the use of common adhesive plaster to cover the spots of Ringworm is strongly recommended by Dr. Clanny, as being capable of itself of effecting a cure. Messrs. Simmons and Bell in vol. xiii. of the *Med. and Phys.* give a similar account. In the fifth volume of the *Repository*, Mr. Bidwell speaks highly of stimulating applications, such as strong savin ointment, ung. hydr. nitr. with the addition of nitrous acid, and recommends occasionally varying these applications where any one in particular should fail in doing good.

In the 13th vol. of the *Med. and Phys. Journ.* a communication from Mr. Low rests chiefly on the efficacy of internal alterative medicines ; but in the cases

more minutely local attention to cutaneous diseases than has been hitherto adopted, it has frequently occurred to me, that by the too frequent reference of many of them to constitutional causes, and the adoption of corresponding treatment, the most efficient and best plans of management have been quite forsaken; and even in those diseases, which, in their very nature, bespeak an origin entirely local, a considerable degree of carelessness of their characteristic features is manifested in the usual regulations laid down for applications to the part.

In no instance is the correctness of the preceding remark more fully borne out, than

which he has detailed, it is evident that more than ordinary attention to abluion of the seat of the disease was had recourse to. In the succeeding vol. lotions of kali. sulph. are recommended by Mr. Barlow; and a subsequent page of the same vol. contains a terrific record of the effects of tobacco in the form of strong infusion to the scalp, to cure a case of long established scalled head, which will certainly act as an admonition to all who read it.

Within a few weeks, the periodical works, on general as well as medical subjects, have circulated a statement in favour of tan water, and water obtained from the gas manufactories, as lotions. The result of my own experience in such applications as the foregoing enables me to see as little prospect of doing any good with them, as hope of eliciting a sound principle of treatment from the chemical analysis of the matter of Tinea of the French chemists.

in that of the disease now under consideration. While it is the conviction of every one, that in the majority of cases which come under our notice, immense numbers of minute pustules are continually forming and discharging their contents on the part, and that a very minute portion of such contents is capable of producing the disease by its application to sound parts in the neighbourhood, yet the greater portion of the applications made use of, consisting of ointments, are more calculated, by being rubbed on the scalp, to diffuse the matter more extensively, and thus extend the disease, than to produce any certain and decided effect towards curing it.

Viewing the matter in the above light, it has hitherto been my practice as a preliminary step to any medicinal application, to effect the discharge of the contents of as many of the pustules as possible, by pinching up the skin between the finger and thumb, and carefully washing away what is thus forced out.

Previous to this, however, an important step must be taken, already alluded to; the removal of any hair remaining on the part, which may appear to come away easily, and without pain to the patient. This precaution

is necessary, whether pustules may have formed in great numbers or not, and not only should such gentle force be used as is consistent with ease to the patient, in trying the hair of the diseased part, but that which is apparently healthy, surrounding the margin, should be submitted to the same test; for it not unfrequently happens, that the hair will easily separate a short distance from this, without pain, and lead to the discovery of the mischief to a greater extent than was first suspected. It must be taken for granted, that those hairs which will separate with a slight degree of force have lost the means of support and nourishment, either as the consequence of the formation of a pustule around them, or from the influence of the irritation of the disease, on its secreting structure which has been explained; and that their remaining sticking in the scalp can only be productive of further irritation on the part.

This being their influence under such circumstances, no objection can arise to their removal by lenient means. A more discriminate application of this principle of treatment is highly necessary however, than the pitch cap seems to afford; and the benefit of the practice will amply reward the little ad-

ditional trouble which may be necessary to the judicious use of a pair of small forceps in its accomplishment. It is presumed that we have had experience enough of the futility of any medicinal application, where no attention to this point has been observed. Shaving the part may be considered, though necessary in all cases after the loose hair has been removed, no effectual substitute for it; and when adopted without this previous precaution, it has an important disadvantage by leaving the extremities of the hair sticking in the skin and exciting a considerable degree of subsequent irritation; and possibly an increased number of pustules.

The removal of the hair having been effected and the extent of the disease fully exposed, the removal of the contents of the pustules, in the manner described, is the next step to be taken. This having been effected, and the part washed with warm water and soap, some astringent application, possessing the power of taking from the secretion its infectious properties, and at the same time sufficiently powerful to constrict the vessels from which it flows, and lessen its quantity, may be made use of.

A solution of the sulphate of copper has been employed in some cases for this purpose:

I believe the object to be more completely accomplished, however, by rubbing this preparation, in a finely powdered state, on the part, and then washing it off.

The slight inflammation which drawing out the hair, and shaving the part occasions, usually produces a few more pustules than would probably otherwise occur, if not kept under for the first day or two, by some sedative application*. A careful examination should be instituted every morning, and if any pustules appear, they should be at once removed, and the sulphate of copper applied, as at first, to the part. After two or three repetitions of this application, no fresh appearance of pustule takes place, and the circle of the disease is marked by small thin scabs of a darkish colour, and the same characteristics in other respects, as the common exudation from abraded surfaces to the cutis. These scabs separate in a few days, bringing with them a few of the remaining hairs which have separated, and leaving a shining red and irregular surface, which gradually loses its inflammatory character, having now and then

* This is the occurrence which I have alluded to in page 66; of course it should be met by the utmost caution in the continuation of stimulants, or by soothing applications exclusively.

a little scurf forming on it, till the new hair begins to appear.

While any redness of the cutis continues, it is advisable to watch the appearance of the new hair, as it sometimes happens, where this is produced very quickly after the disease has been subdued, that the excitement it occasions is followed by a slight fluid secretion, concreting into minute scabs, and contributing to retard the production of a strong and healthy cuticle.

The effects of the disease on the scalp where a great number of pustules have been formed, is such as to prevent a rational hope of strong and healthy hair covering the part, in a shorter period than six weeks or two months; at the end of three months, however, it will usually have attained its original strength.

After the adoption of the practice described, we shall not, as heretofore, be dependant on the growth of fresh hair, and its soundness in the part, for a test of the termination of the disease; for if this be fully carried into effect, the occurrence of fresh pustules will be prevented, and the specific action of the part, if any should remain after the separation of the scabs, will subside, long before the new hair makes its appearance.

The positive and decided manner in which

any thing like depilation has been condemned by Dr. Willan and others, appears to call very loudly for my attention, in this part of the subject. A principle which experience fully justifies me in pronouncing a most important one, in the successful treatment of the disease, has been formally denounced by this author, and others, who have followed him, as doing more mischief to the scalp in one day, "than the disease, left to itself, would effect in three years." This sweeping assertion is, it is true, somewhat qualified by the conjunction, "if the head were kept clean;" and knowing, as we do, that under such circumstances, the disease can do no permanent harm, and bearing in mind also, what has been said in a preceding page of the influence of cleanliness, in checking its extension, if we believed that any mischief at all arose from forcibly separating the hair, we might yield a qualified assent to this opinion.

It is not, however, with cases in which cleanliness to its completest extent has been observed, that we have often to deal; and whatever may be the influence of the forcible removal of the hair, by its roots, from the parts affected, on the structure secreting such hair, as regards its reproduction, little doubt will be entertained, that the disease itself,

where the slightest attention to cleanliness is observed, has no properties likely to produce a permanently prejudicial effect of this kind.

The removal of the hair, however barbarous the means by which it is effected, is never followed by baldness, and after a few weeks have elapsed, the new hair in all cases obtains the strength of that which before covered the part. As well might we expect that long protracted sores, on the extremities of the toes or fingers, producing the death of the nail*, and its final separation, should prevent a reproduction of such nail; but we well know that a most extensive suppuration, if not an actual sloughing of the gland, is necessary to prevent portions of new nail appearing, after the sore has healed.

To put a stop to the secretion of the nail,

* The common occurrence of the separation of the nails of the toes, when ulceration of the integuments surrounding and in contact with them takes place, may be referred to, as an analogous instance of the influence of parts dissimilar to those diseased, in keeping up irritation. The nail, in these cases, even before the destruction of its life, becomes so far of an extraneous character as to excite a suppurative action around it, eventually extending to its root, and being followed by its complete removal. A series of changes are gone through precisely similar to those which, on a minuter scale, appear to extirpate the hair in the pustulation of *P. Scutulata*.

or the secretion of the hair, it is necessary that the organ of such secretion should be destroyed; and when in ringworm of the scalp, except as I have already stated, where ulceration has extended to the pericranium, can the adipose structure described be said to have been destroyed? It cannot happen from drawing out the hair—it cannot happen as the consequence of the disease merely—it cannot occur without the production of extensive ulceration. That such ulceration is liable to follow the disease in bad habits of body, and where no attention has been paid to it, cannot be denied; but the separation of the hair simply, can never destroy its secreting structure, and consequently never do the slightest mischief*.

It is not the principle of removal, by extraction, of the hair on the diseased part, that admits of question as to its correctness and propriety, but the means by which such

* It may be observed, that I assume that the nature of the mischief which the scalp is said to sustain from depilatories must be such as relates to the future growth of the hair. Such, it is presumed, must have been the meaning of Dr. Willan in the sentence quoted, since it is difficult to conceive that extraction of the hair, or the use of any application tending to hasten its separation, could produce what may be considered a permanently prejudicial effect in any other way.

principle has been hitherto usually carried into effect. The imagination shrinks with horror at the idea of forcibly tearing off the pitch cap, alike dragging with it the sound and unsound hair, and the scabby secretions of the tender and irritated surface from its attachments, and inflicting as much pain as the most resolute of dispositions can scarcely support; but from all these inconveniences, the use of a pair of forceps is perfectly free. They are applied only where the disease exists, and to hair already loosened; the slightest degree of force is sufficient to remove such hair, where force is at all necessary; and no pain will be found to attend it.

A short period usually elapses, after the check to the regular secretion of the hair commences, and before its entire separation; during such time, the hair should be considered as exciting that degree of irritation, to which I have attached so much importance in keeping up the disease. The cessation of secretion of the hair, and its dropping off, cannot be the work of the same moment; it must remain sticking in the part some time: let it not be said, therefore, that no necessity exists under these circumstances for its removal, or that the irritation it excites

is too slight to require notice; for there is no reason to doubt, that the hair in causing the pustules of the *P. Scutulata*, produces the same series of effects, on a minuter scale, which take place where irritation and a suppurative state of parts arise from the presence of the nail on the fingers or toes:—whether separated from the parts whence it originates, or attached at its root to these parts, such influence will still continue to be evinced so long as the nail remains.

It will be observed, that the treatment I have described in the preceding pages, as applicable to the state of simple Ringworm, requires some modification in those long established cases, where great accumulation of scabs, portions of ulcerated surface, and a high degree of confirmed irritation of the vessels of the part, exist. In a case of this kind, the subject of the plate No. 2, and in several others of a similar description, the difficulties of subduing the excessive irritation of the disease were for a considerable period considered insurmountable. Fomentations, poultices, and cold lotions, were successively and diligently applied; each for a sufficient length of time to have produced, under common circumstances, an effectual check to inflammatory action. Still the redness and

heat of the part remained obstinate, and where a few straggling hairs were seen, a constant production of new pustules was discovered, as fast as others were removed. A total extirpation of the remaining hair over the whole surface was eventually accomplished, the ulcerated portions healed, and the fluid secretion diminished; the inflammatory redness and heat of the part continued, however, and around the healthy margin, new pustules and scabs affecting the sound hair were every day appearing.

The preceding applications, with others of various descriptions, were changed one for another without success, till a small spot, whence the hair had been first removed, was occupied by fresh, and immediately after, pustules appeared among it. It appeared now, that any further attempts to get rid of the disease would be frustrated by the increased irritation of the new hair, which might be speedily expected to spring up over the greater part of the surface; but except on the spot I have mentioned, no more hair appeared, and I was led, shortly after, to endeavour to apply pressure by means of adhesive straps and bandages, with the cold lotion in conjunction. By the diligent application of these for two or three weeks, a material

change was produced, and the scalp began to assume an appearance more nearly approaching to health. To completely subdue the diseased action was a work of much time, but I had the satisfaction of seeing eventually (as I have already stated in a previous allusion to this case), the part completely covered with long and glossy hair.

In other cases of a similar character, of four and six years standing, I have experienced proportionately smaller degrees of obstinacy; but in no single case has the plan last mentioned,—pressure and cold applications combined, failed in subduing the disease. In the majority of these cases, the necessity of the extraction of the hair was frequently forced on my attention, by the obstinate repetition of pustules where any appeared on the diseased surface; and I have, consequently, made this a preliminary step, in every subsequent case, to the above plan of treatment.

In the course of my observation of some of the cases to which I have alluded, I was led to imagine that the insertion of a seton in the neck, where the discharge and excitement were very considerable, would be likely to expedite the cure, and this on a very obvious principle; and I subsequently found,

in consulting a very old author * on the subject, that it had been recommended with a considerable degree of confidence. In two instances in which it was made use of, however, and where the violence of the irritation and excessive discharge seemed to justify the experiment, no benefit appeared to be derived. One of these occurred in a child who had been a long time the subject of severe Entropium; and the two diseases together, by their ceaseless irritation and pain, may be supposed to have formed a more complicated case of misery than often falls to our lot to observe. It is a curious fact in the history of this latter case, that as soon as the disease of the scalp was completely removed, the inflammation and pain from the mischief in the eyelids almost entirely subsided.

The foregoing description of the local treatment of the disease comprehends every thing on which I am enabled, from experience, to speak with decision. In condemning the use of greasy applications of any kind, which have not the power of destroying the infectious properties of the contents of the pustules, I am justified, not only by reasoning *à priori*, but by the evidence of facts; for I have

* Turner.

frequently seen the disease spread with greater activity, after such applications, than before they were made use of.

The necessity of internal remedies in cases of simple Ringworm, or that stage of the disease usually seen in the middle and higher classes, where attention to the frequent cleaning of the children's heads is observed, may with much propriety be doubted. It is certain, that in such classes we rarely trace the slightest connexion of the disease with constitutional causes; but under different circumstances, as in cases approaching in similarity to that last alluded to, the occurrence of severe constitutional irritation may be expected, and a feverish state of the system is rarely absent. Constitutional treatment is, of course, then directed, to subdue symptoms consequent on the irritation of the disease, and not to correct a state of the system, on which it may be supposed to depend.

P. FURFURANS AND P. LUPINOSA.

IN the foregoing remarks on the pathology and treatment of Ringworm and Scalded head, I have included every thing requisite to effect a speedy cure of these obnoxious and

filthy diseases. It has appeared to me, that the descriptions of these affections, given us by Alibert and Bateman, together with the division into so many different species which they have adopted, may be advantageously dispensed with, because they rest entirely on points of no importance in correct pathology ; the consistence, colour, and structure of a scab, the neglected accumulation of the secretions of the diseased spot, having in all such descriptions obtained a prior consideration to the state of the skin itself. If, instead of writing descriptions of the accidental variations alluded to in the state of the secretions, and making artificial distinctions founded on such variations, they had taken the trouble to clear them away, and institute a minute examination of the skin itself, the latter would have been found in all cases to have exhibited the same precise characteristics of deviation from the healthy state ; no matter whether previously concealed by the glutinous adhesive covering of the *Porrigo Furfurans* *, or the dried, thickened, and

* *Teigne furfuracée* of Alibert. The plate No. 4 of this author of *Teigne Amiantacée* is neither more nor less than an utterly neglected case of the disease, where the secretions have been suffered quietly to mat the hair together, and form a complete shield over the whole scalp ; whereas

more circumscribed scabs of the *P. Lupinosa**; excepting, of course, such differences in extent and apparent activity of the inflammation, or in the quantity of affused secretion on the surface, as temporary or accidental conditions of the system or degree of irritability of skin in the individual may give rise to.

From the *ad captandum* kind of manner in which the external characters of different cases of Porrigo, when first coming under the notice of the physician, have been seized and made use of as the ground-work of description, it would indeed be a matter of surprise if any other result than ill-founded distinctions should occur; but if the history of such cases from their commencement had been sedulously inquired into, and good information had been obtained of the state of the skin before such accumulation of the secretions occurred as to produce a thickened scab, the species *Furfurans* and *Lupinosa* would never have had existence. It would,

that of *Teigne furfuracée* having occurred perhaps in a more decent member of society, exhibits the difference which cleanly habits are capable of producing in its complexion.

* *Teigne Granulée* of Alibert.

I think, have been ascertained, that the form in which they first appeared was that of *Porrigo Scutulata*, and that increased or diminished activity in the vessels of the part, and, consequently, greater or smaller extent of the disease, formed the only ground of distinction between the two cases. From these circumstances, not only does an increased number of pustules exist, but the vessels producing the cuticle are also morbidly excited, and considerable ill-formed layers of this substance are formed, which, mixed with the fluid secretion of the part, form that glutinous covering to the scalp, represented in the plates of *P. Furfurans* of Willan and Bateman, and *Teigne furfuracée* and *Amiantacée* of Alibert.

It is true, that in that state denominated as above, "no separation of the hair is distinguished on a superficial view of the disease, but it is retained in its place after it has ceased to receive nourishment, by the adhesive properties of the secretion. The interstices of the hair appear to be occupied by a layer of furfuraceous scab of different degrees of dryness, the production conjointly of the vessels producing the cuticle, and those pouring out the fluid of minute pustules, which, as in the

Porrigo Scutulata, are formed round the hair." The idea that the scab is formed by the mere exsiccation of the fluid secretion is incorrect *.

In a preceding page, I have alluded to the question of the origin of the P. Scutulata from long protracted or neglected Pityriasis, or other morbid scurfy states of the scalp; and I think the conclusion I have hinted at will derive some support, from the examination of the most striking characteristic of the P. Furfurans. In the latter, an accumulation of morbid cuticle, mixed up with, and partially dissolved, in the fluid secretions of the pustules, is a distinguishing feature, making it a mixture, in short, of Porrigo and Pityriasis; and it should appear, that the proportion of fluid secretion to that of the vessels producing the morbid cuticle, determines the degree of approximation of the disease, to the common Ringworm, or simple Pityriasis.

On removing the covering which the diseased secretions form, a similarly excited state of the scalp is discovered, marked by heat and

* "The discharge from the pustules is small in quantity, and the excoriation slight: the humour therefore soon concretes, and separates in innumerable thin laminated scabs or scale-like exfoliations." BATEMAN.

redness, which obtains in *P. Scutulata*, and the fluid secretion is found to originate as in this disease, in pustules surrounding the hairs. The moist and adhesive properties of the mixed secretions render it a matter of great difficulty to separate it from the scalp. Even when the use of warm water and soap has been continued for some time, some violence is necessary to its removal, so far as to show the state of this part satisfactorily, and admit of the efficient application of remedies.

In the majority of cases of long standing, where the pustules are distributed very thick, very little more pain is felt in plucking out the hair by the roots than in the attempt to clear away the secretion, and the greater part of the hairs are found when drawn out, with the scurfy scales sticking to them, to have been insulated by pustules as in the *P. Scutulata*.

As the peculiar appearance of this state of *Porrigo* depends only on the participation of those vessels which produce the cuticle, in the general excitement of the part more largely than occurs in the *Scutulata*; and as the general resemblance in other points is so marked, no hesitation need be felt in adopting the principles of treatment laid down in the preceding pages for the former, for the ma-

nagement of the latter. If the pain excited by the extraction of the hair is very considerable (which is not often the case), it must be sometimes given up for a less successful, and indeed a mere palliative plan of treatment; for the removal of the hair, by some means or other, appears as necessary to the speedy and effectual cure of this species as of the other. When such practice is forbidden by the pain it produces, it will be in spots where the disease is not fully established, or where pustules are not formed in sufficient quantities to have loosened the hair; in which case, the secretions should be patiently washed, or brushed out, from the interstices, when shaving may be had recourse to; and it will not be a matter of much difficulty, after this has been satisfactorily effected, to keep the scalp free from further accumulations. To attempt to shave the scalp completely, however, when covered by the secretion, would be futile: the razor passes into it with no greater readiness than it would into half dissolved glue; and by persisting under these circumstances, the scalp is liable to be sliced and cut to a considerable extent and depth.

When by the removal of the hair or the scabs, and the operation of shaving, the scalp has been completely cleansed, its active in-

flammatory state will commonly yield to the persevering use of the cold wash. Now and then, however, it will be found assuming a considerable obstinacy of character; where the hair has not been drawn out by the roots, fresh pustules are constantly occurring, and the increased secretion of morbid cuticle continues; and where this precaution has been taken, though the formation of pustules or secretion of any fluid soon ceases, yet, in this case, even, the redness sometimes remains, and the production of scurf continues.

Under those latter circumstances, an assiduous application of the spirituous lotion, and a frequent washing of the scalp with soap and warm water during the day, will, while it prevents accumulation of scurf, eventually subdue the inflammation, and restore the natural colour and healthy state of the part.

When this species of the disease has been of long duration, a scurfy state of the scalp usually continues, after all appearance of pustules, of irritation, or fluid secretion, has ceased, and after new hair has grown on the part. To remove this inconvenience, a weak solution of lunar caustic has been recommended, and is very beneficial. A lotion of alcohol diluted, if employed alternately with this, will be an useful auxiliary.

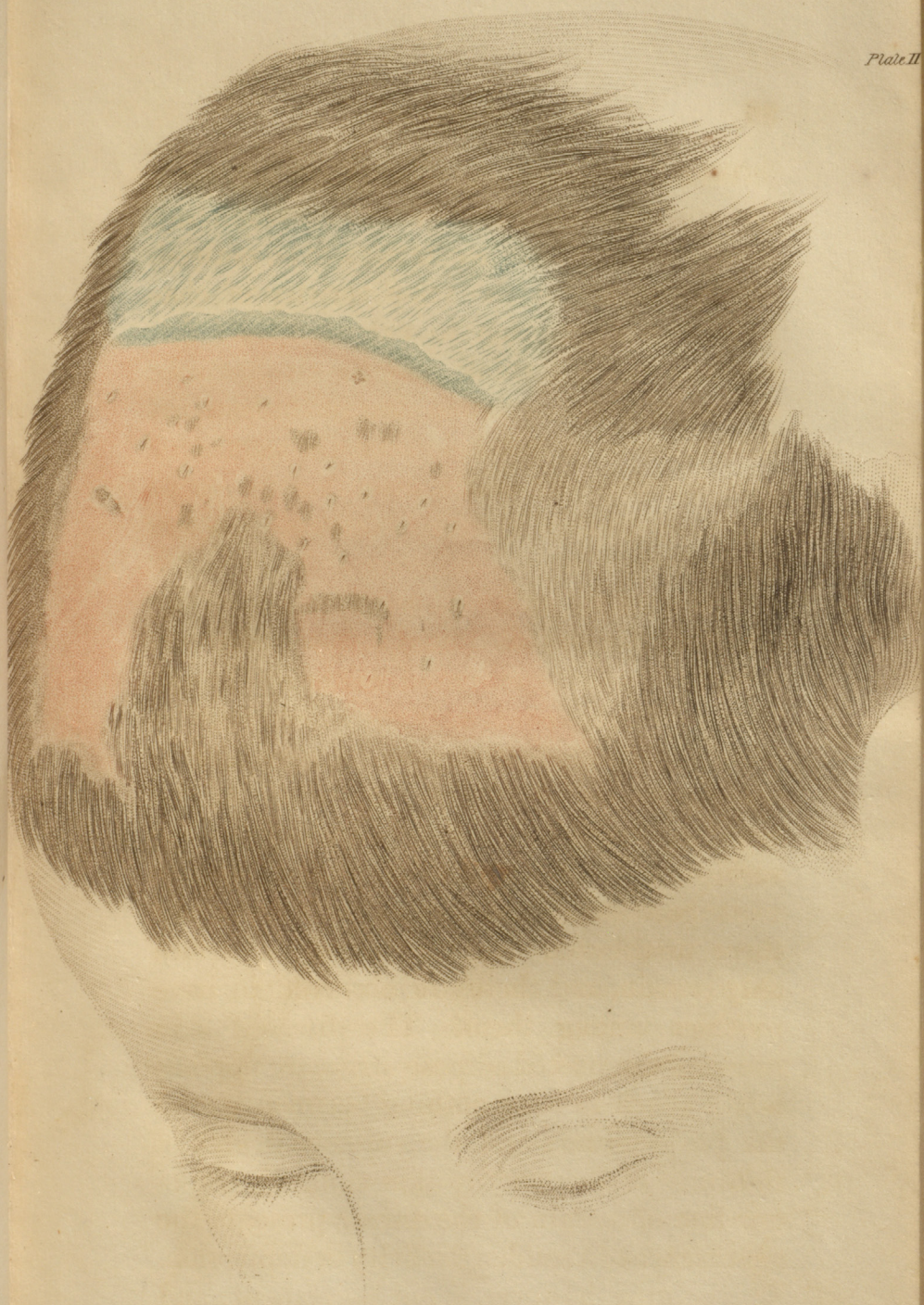
In the common scurfy states of the scalp, this latter application will be generally, (if regularly persevered in for a short time), found to supersede the necessity of any other ; and will effectually prevent that irritation of the part, by which such states are sometimes followed. The efficacy of medicinal applications, except such as are plainly indicated on sound surgical principles, is about as great in this state as that of simple Ringworm. The ointment of *coccus indicus*, so much lauded by Dr. J. Hamilton and Dr. Hume*, has, in my hands, never been followed by any permanent advantage.

It is not necessary, after what has been said, to trouble our readers much on *P. Lupinosa*. It appears to have obtained its name from the substance of the scabs, when long untouched, being largely made up of little granular substances resembling lupine seeds. The scabs of this form of the affection are generally nearly of a circular form, dry, and, on being broken to pieces, exhibit a number of the little white powdery substances alluded to : these being formed of the contents of the pustules which have been suffered to dry up on the spot.

*Vide a Practical Treatise on Porrigo, or Scalled head, &c. by the late Robt. Willan, edited by Mr. Ashby Smith, before alluded to.

When the secretions have been removed, the same appearance of pustules surrounding the hair, as in the other states, will be noticed, but by no means the same activity of character, or disposition to extend itself: differences which I think may be satisfactorily referred to a less irritable skin in the patient. The removal of the hair from the centre of the pustules, and strict attention to cleanliness, is usually speedily followed by the cure.

The changes produced on the scalp in long established cases of Porrigo have been attempted to be represented in the subjoined plate. The adipose structure described as secreting the hair undergoes a considerable diminution or wasting, as the effect of the ceaseless irritation and discharge from the surface of the scalp, while the hair is for the most part extirpated; small tufts here and there distributed over the diseased surface only remain, and these are observed to have pustules among them. The diseased skin covering the wasted adipose structure appears to the touch to have nothing between it and the pericranium; and the superior degree of thickness of the healthy skin along the superior line of margin of the disease presents the appearance of a sudden declivity or depression. This wasting, however, is not permanent; and



as the irritation on the surface is subdued by the plan detailed in the preceding pages, and the remaining hair removed, the skin gradually, except where deep ulceration has occurred, re-assumes its original solidity and thickness, and the new hair begins to make its appearance.

On the subject of the infectious properties of Porrigo, it is necessary to state that the advanced and neglected conditions of the disease are not possessed of this property to any considerable extent; and indeed I am not satisfied that it does not, in the course of time, lose the power of infection altogether: its specific character seeming to subside into the mere effects of local irritation upon diseased parts.

Negligence and filthy habits have an extraordinary influence in nursing up and encouraging cutaneous diseases of every kind, particularly those under consideration, which are rarely seen in their worst forms without some increase of strength and obstinacy from these causes: it is scarcely necessary, therefore, to observe, that washing and the removal of the secretions can never be too frequently repeated.

SECTION II.

CHAPTER IV.

On diseases dependent on debilitated and deranged states of system, and consequent diminished tone of the vessels of the cutis.

UNDER this title I propose to consider the varieties of Purpura, and the cutaneous affection of scurvy, or, in other words, the variations of constitutional condition under which actual rupture of the minute extremities of the vessels of the surface occurs; that state of relaxation in which the serous portions of the blood only escape, forming by its extravasation under the cuticle what has been termed bullæ or blebs—and the diseases designated Ecthyma and Rupia.

The exclusion of the influence of the state of constitution in giving a character to cutaneous diseases in the attempts at clas-

sification which have been made heretofore, has been much noticed, and objected to with good apparent reason, and hence but little surprise will be felt at my including under one head, diseases which form parts of no less than four different orders of preceding authors. The objection to the classification alluded to, that the particular state of constitution on which the disease may depend is omitted, appears to be well-founded, because it is quite evident that no useful result can accrue in classing diseases according to their local characters, if the state of constitution on which they depend, and through which only any remedy can be conveyed, is unnoticed. In the consideration of those diseases which form the subject of the present chapter, this observation applies with peculiar force, for the constitution is most certainly the medium through which any efficient remedial measure can be employed: local applications being rarely required or admissible.

The disease termed Purpura, in its more formidable shape, accompanied by a train of symptoms immediately threatening the existence of the patient, merits, and appears to have obtained, at various periods, the attention of some of the most distinguished characters in the history of medical literature;

and the names of Parry, Bree, Buxton, Duncan, Harty, and others, are scattered through the volumes of the periodical press, in connexion with communications regarding it, not inferior in correct observation to their more distinguished works. It is a disease under such form, as frequently paralyses the hand of the physician, and suspends in doubt and apprehension the decision of the most practised and fearless mind. Its distinguishing feature is, on the one hand, according to received notions, identified with the lowest degree of debility; on the other, it is ushered in with symptoms which cannot subsist many hours uncontrolled by active treatment, without the most imminent peril to internal organs. In one point of view, the probability exists of extinguishing life by extracting a few ounces of blood; in the other, this measure appears a matter of absolute necessity.

To ascertain the causes of this apparent inconsistency of symptoms, and to reconcile it with a systematic line of treatment, seems at first sight a matter of much difficulty; and though the original opinion of the character of the complaint ought not to be impeached, merely because symptoms of apparent inflammation occur at times in conjunction with the cutaneous affection; yet it appears to be

clear, that want of tone in the vessels of the surface is perfectly compatible with unimpaired strength of the system at large, and capable of being produced to such an extent as under the ordinary impetus of the circulation to admit of the rupture of such vessels; forming, in some cases, the *Purpura Simplex*, or *Petechiæ sine febre*; and in others, the more serious and formidable *P. Hemorrhagica*.

The best descriptions extant of the *Purpura Simplex* concur with each other in attributing it uniformly to a state of general debility; but it is nevertheless sometimes seen as well as the *P. Hemorrhagica*, where such a state of system does not exist. The appearance of the spots or *Petechiæ* is almost too well known to require description: they are "small, distinct, purple specks and patches" usually distributed over every part of the body. Although classed by Willan and Bateman in the order *Exanthemata*, this form of the disease is rarely attended with fever, though not unfrequently with manifest disorder of the digestive organs.

There is every reason to admit the truth of the observation, that loss of tone in the vessels of the surface is requisite to admit of that rupture of their extremities and con-

sequent extravasation necessary to the production of Petechiæ; and also that the cause of such loss of tone must have a constitutional origin. It is not true, however, that an obvious wasting of the solids and other symptoms of debility always precede it; or that deficiency either in the quantity or quality of the food taken, or that excess of laborious bodily or mental exertion, is necessary to its production. It unquestionably does occur most frequently under such circumstances, but it is also sometimes seen in persons who a day or two previous have been in apparent good health. It is usually accompanied with sensations of languor and lassitude, even in these; there is a furred yellow tongue and uneasiness in the head, nausea and constipation and diminished appetite; a train of symptoms, in short, indicating the highest degree of derangement of the digestive organs. If this state of disorder exist, it has appeared to me not unfrequently, that the most robust and full habits of body are more liable to Petechiæ, though appearing partially, than those of an opposite character, and I have been led to form this opinion from having witnessed several cases, of which the following may be taken as a specimen.

A young female, usually enjoying pretty

good health, of a robust habit of body and florid healthy complexion, had complained for two or three days of nausea, constipation, uneasiness about the head, loss of appetite, &c. ; with a view of removing which, she had, the day before I saw her, taken some aperient medicine. The latter not appearing to have given the expected relief, she on the following morning had recourse to an emetic of ipecacuanha : after a few efforts to vomit had been produced, the persons about her were alarmed by the sudden appearance of Petechiæ of very considerable size, distributed exceedingly thick over the whole of the face, neck, and shoulders, while the conjunctiva was almost entirely suffused with blood. Her complexion had been exceedingly clear previously, and the sudden and extraordinary change which the appearance of the disease effected, excited the highest degree of alarm. Her pulse was at this time hard and quick, and she complained of deep seated pain in the chest : having however seen other cases of a similar kind, where bleeding was dispensed with, and a speedy cure brought about by the use of cathartics, I depended entirely on the latter, and made calomel an important part of what I exhibited. The offensiveness and pitchy colour of the evacuations, as well

as the immense accumulation of undigested aliment which they contained, amply satisfied me that this was the best and most direct plan of treatment.

It has been maintained by some writers, and among others, I believe, by Dr. Mills, Dr. Parry, and Dr. Combe, that venous congestion is necessary to the production of Petechiæ. However true this may be in the Petechiæ of low fevers, it may be doubted as regards those occurring under symptoms of general debility, unaccompanied by fever, as well as those arising from disorder of the functions of the abdominal viscera, where fulness of system is not decidedly marked. It must be admitted, however, where the latter exists, as in the case above detailed, that such congestion is sometimes, at least, temporarily established, and precedes the appearance of the disease.

I entertain some doubts whether Purpura Simplex, or Petechiæ sine febre, may not be said to be *always* preceded, whether in debilitated or other constitutions, by some disorder of the digestive organs, as in all the cases which I have had an opportunity of observing, where symptoms of such disorder were not plainly discernible; the state of the evacuations only, fully justified the

opinion. I should be inclined therefore to place debility of system, and the disorder mentioned, in the relation of predisposing and exciting causes of the disease. Whether this opinion stand the test of the experience of others or not, it is evident no harm can arise in commencing the treatment by some alterative aperient, and this course is entitled, therefore, to the preference over one which rests solely on the exhibition of tonics. Purgatives will frequently remove every vestige of the disease without having recourse to tonic medicines at all; but of course it is not meant to be stated that the latter can be dispensed with with propriety, if symptoms of debility remain. As medicines, bark and the acids seem to be entitled to the preference where a tonic plan of treatment requires to be instituted.

The very correct description of Willan and Bateman of the *P. Hemorrhagica* discloses no points of dissimilarity between the latter and *P. Simplex*, but such as constitute merely difference in degree both of the cutaneous affection and the constitutional symptoms. In *P. Hemorrhagica*, a few of the smaller *Petechiæ* are intermixed with large spots of extravasated blood, varying greatly in extent, according to the situation of the part, being

largest, and often appearing first where the return of the blood to the heart is effected with the least facility, or where a greater degree of warmth is produced by the covering of the part, or other circumstances. The lower extremities affording instances of this, while the spots on the face and neck are proportionably less. From the same cause partly, so far as heat is concerned, and partly from the greater degree of delicacy of the cuticle in these situations, the inside of the cheeks and lips, the surface of the tongue, and membrane of the labiæ pudendi and vagina, frequently pour out dark-coloured blood in considerable quantities; while the motions are often discoloured by this fluid to an alarming extent. The slightest degree of pressure applied to the surface of the body appears to break down the relaxed and delicate veins of the spot, and produces a mark of contusion considerably larger than what may be supposed to have been covered by the compressing substance applied: even the pressure of the finger, as in feeling the pulse, has been stated to be adequate to the production of this effect. In examining the gums attentively, the superior edge in contact with the tooth sometimes appears to have lost here and there its florid complexion; to have

become changed to a livid venous hue, and to have blood of the same colour oozing from them between the teeth. In some instances, the formation of vesicles has been effected, containing extravasated blood, the quantity of the latter having been equal to the distension and elevation of the cuticle: an occurrence, for obvious reasons, more common on the membrane of the mouth and lips than on other parts.

“ The same state of the habit which gives rise to these effusions under the cuticle, produces likewise copious discharges of blood, especially from the internal parts, which are defended by more delicate coverings. These hæmorrhages are often very profuse, and not easily restrained, and therefore sometimes prove suddenly fatal. But in other cases they are less copious; sometimes returning every day at stated periods, and sometimes less frequently and at irregular intervals; and sometimes there is a slow and almost incessant oozing of blood. The bleeding occurs from the gums, nostrils, throat, inside of the cheeks, tongue, and lips, and sometimes from the lining membrane of the eyelids, the urethra, and the external ear; and also from the internal cavities of the lungs, stomach, bowels, uterus, kidneys, and bladder. There

is the utmost variety, however, in different instances, as to the period of the disease, in which the hæmorrhages commence and cease, and as to the proportion which they bear to the cutaneous efflorescence.

“This singular disease is often preceded for some weeks by great lassitude, faintness, and pains in the limbs, which render the patients incapable of any exertion; but, not unfrequently, it appears suddenly in the midst of apparent good health. It is always accompanied with extreme debility and depression of spirits: the pulse is commonly feeble, and sometimes quickened; and heat, flushing, perspiration, and other symptoms of slight febrile irritation, recurring like the paroxysms of hectic, occasionally attend. In some patients, deep-seated pains have been felt about the præcordia, and in the chest, loins, or abdomen; and in others a considerable cough has accompanied the complaint, or a tumour and tension of the epigastrium and hypochondria, with tenderness on pressure, and a constipated or irregular state of bowels. But in many cases, no febrile appearances have been noticed; and the functions of the intestines are often natural. In a few instances frequent syncope has occurred. When the disease has continued for some time, the patient becomes

sallow, or of a dirty complexion, and much emaciated; and some degree of œdema appears in the lower extremities, which afterwards extends to other parts."

The pains described in the foregoing passage from Dr. Bateman are noticed in almost every case recorded, both before and since the publication of the latter; and an attentive perusal of the cases will also generally discover an intimate connexion between them, and high degree of disorder of the digestive organs: the evacuations, where they have been at all attended to, exhibiting proofs that the secretions have been for some time in so vitiated a state, as to be quite incompatible with generally healthy sensations to the patient, or with the due and efficient carrying on of the processes of digestion, and consequent support to the system. In the cases recorded by Dr. Harty, of Dublin, Dr. Buxton, Mr. Rogerson, and others, to which I shall refer more explicitly hereafter, these facts were most particularly noticed, and were allowed to point out a line of treatment which was followed by the most gratifying results. It may be true that, in many cases, as stated in the preceding quotation, "no febrile appearances have been noticed, and that the functions of the intestines are often natural."

The remark, however, does not apply satisfactorily to any which have come under my notice, nor are the cases on record, which I have been able to refer to, calculated to support such a statement.

Influenced by a consideration of the obscurity in which the pathology and treatment of Purpura is involved, as well as by the great importance of the question as to its dependence on the same causes as scurvy, I have been induced to arrange the following table of ten reports, recorded at different periods within the last fifteen years. I have been anxious at one view to present a correct notice of the most prominent constitutional symptoms co-existent with the cutaneous affection in the different cases, together with the plans of treatment adopted, and their various results.

The obvious similarity of the phenomena of Purpura in many essential points to that of scurvy, had led to the opinion of its being merely a modification of the latter, and the result of the treatment of a case detailed in the medical cases, and observations of Dr. Duncan*, with that of another to which this author al-

* Medical Cases selected from the Records of the Public Dispensary at Edinburgh, with Remarks and Observations by Andrew Duncan, M. D. F. R. and A. S. Ed. 1784.

A TABLE OF CASES.

[To face page 106.]

Name of Reporter.	Description and State of System, &c. under which the Disease appeared.	Hemorrhage, where from.	Appearance of the Tongue.	Pulse.	Internal Pains, and their Seat.	Whether bled, and the Characters of Blood drawn.	Medicines exhibited.	Effects of Purgatives when had recourse to.	Termination of the Disease.	Journal in which the Case is recorded.
1. DR. PARRY.	A female, aged 60. Full habit, slight febrile symptoms.	None.	Little furred.	Full.	None noticed.	V. S. Blood. Cupped and buffy.	None noticed.	.....	Recovery.	Ed. Med. and Surgical, vol. 5.
2. DR. BREE.	A female.—A disposition to corpulence, with slight symptoms of determination to the head.	None.	Not stated.	70 full, but not hard.	None noticed.	V. S. Blood dense, but not inflamed, apparently beneficial—repeated afterwards from the disposition to paralysis, and subsequently cupping.	Jalap and calomel often repeated.	Purging kept up during the disease, but the state of evacuations not noticed.	Recovery.	Medical and Physical Journal, vol. 21.
3. DR. HARTY.	1. A corpulent female, aged 30.—Pretty good previous health.	Slight hemorrhage, gradually getting more profuse through the case; wherefrom not stated.	Not stated.	Not stated.	Severe pain and gnawing at pit of stomach: indigestion.	Bleeding not had recourse to.	Tonics and good living, and the advice of Dr. Willan strictly followed.	.....	Death.	Ed. Med. and Sur., vol. 9.
	2. An opposite state of system and bad general health.	Hemorrhage, from the mouth, nose, and stomach.	Not stated.	Not stated.	Pain in epigastrio.	Bleeding not had recourse to.	A brisk purgative of calomel and jalap every night.	Purging kept up, but state of secretions not stated.	After each purgative evident improvement, and by the tenth day not a single spot remained.	Ed. Med. and Sur., vol. 9.
	3. A boy 3 years old.	Nose, gums, and fauces.	Not stated.	Not stated.	Pain in epigastrio.	Bleeding not had recourse to.	Calomel and jalap every night for four nights.	Free evacuation of feces, black, like pitch, gradually improving, and the purging continued.	Rapid recovery, complete in six days.	Ed. Med. and Sur., vol. 9.
4. MR. ROGERSON.	1. A young female.—Debilitated habit, and supposed disposition to phthisis.	Stomach and nose.	Flesh-coloured.	100 full, and intermitting.	Oppression at stomach, nausea, thirst, constipation, headache.	Bleeding not had recourse to.	Calomel and antimony to the effect of purging kept up.	Black offensive motions, directly followed by improvement and relief of pain.	Rapid recovery from the time the bowels were freely opened.	Med. and Phys. vol. 42.
	2. A man who had been some time ill, and in a state of debility.	Bladder, the urine coloured with blood.	Covered by dark-brown fur, offensive breath.	.....	In the head, abdomen, and chest, constipation.	V. S.	Calomel and jalap.	Copious evacuations of a dark colour, and very offensive: as the operation was kept up, the stools improved, till they became healthy.	Recovery.	Med. and Phys., vol. 42.
5. DR. BUXTON.	No apparent debility or fever.	Spitting of blood from the velum palati and throat.	Tolerably clean.	Quick, soft, and small.	Pain not noticed: bowels regular, but dingy skin.	Bleeding not had recourse to.	Brisk purgatives continued through the case, with acids.	Evacuations copious, dark olive-green colour, no mixture of blood.	Recovery.	Med. Repos. vol. 19.
6. EDITORS of the MED. REPOSITORY.	A boy, 12 years old. With anasarca from temporary debility.	From the nose.	Not stated.	Quick.	In the epigastrium, with tenderness and oppressed breathing.	Bled once to 8 oz., with relief to the breath.	Calomel and jalap, the action of which was constantly kept up.	Evacuations copious, and dark-green.	Recovery.	Med. Repos. vol. 6.
7. DR. NICHOLL.	A man, aged 37.—Very good general health, but lately weakened by an attack of fever.	From the mouth and bowels.	Not stated.	Not stated.	No pain noticed.	Bleeding not had recourse to.	Had previously taken purgatives. Calomel and jalap, and next day ol. terebinth, regularly continued twice a day.	Evacuations denoting deranged secretions.	Recovery.	Med. Repos. vol. 16.
8. DR. G. JOHNSTON, of Berwick.	A married woman.—Stout and robust.	Blood oozing from the nose, and mixed with the sputa; bloody urine.	Covered by a dark brown and white fur.	Very quick and weak.	Head and back, with oppression about the chest, constipation.	V. S. With temporary relief to the breathing.	Pil. Colocynth first, and afterwards calomel and jalap.	Bowels not at all opened by the medicine.	Death.	Ed. Med. and Sur. No. 72.
9. DR. DUNCAN, Jun.	A young man, by trade a tailor, of debilitated habit.	Mouth and nose.	Not stated.	100 and small, bowels not confined.	Abdomen, with symptoms of dyspepsia; pain in epigastrium.	V. S. Blood not buffy, but afterwards the operation repeated.	Purgatives, calomel and jalap; lastly, calomel. Acids followed by aggravation.	Dark and fetid evacuations before purgatives were used; the evacuations the same afterwards, very offensive.	Death.	Ed. Med. and Sur., No. 72.
10. MR. PRETTY.	A little girl, 7 years old.—Pretty good health, but subject to cough.	Labia pudendi.	Much furred.	Quick, but not hard at first, but subsequently rapid and inflammatory.	Oppression about the chest, pain in the stomach, nausea, headache, constipation.	V. S. To a small extent, afterwards repeated largely, with temporary relief of the breath.	Calomel and colocynth, and subsequently a cathartic mixture.	Fetid evacuations, which do not appear to have been briskly kept up by the medicine.	Death.	Med. and Phys., vol. 49.

ludes in a following page, from the pen of Dr. Graaf, of Goetingen, go far to the establishment of such an opinion, and hence, probably, has arisen the occasional adoption of the term land scurvy. This view of the matter seems to have been very generally taken and acted upon up to the period of Dr. Willan's publication.

The ideas of the latter author, together with his rather unqualified recommendation of bark, wine, acids, and good living, seem to warrant the conclusion, that the cases which had chiefly come under his notice were similar to those above alluded to. Dr. Parry, however, in the paper noticed in the annexed table, has adopted a different, or rather directly opposite opinion; he considers the cases he has detailed as confirming his opinion that "in various diseases, among which may be reckoned inflammations, profluvia, hemorrhagies, dropsies, exanthemata, and other cutaneous eruptions, and even the generality of nervous affections, there is one circumstance in common, which is *an over distension of certain blood-vessels*, arising probably from their relative want of tone, or the due contraction of their muscular fibres, and that the cases he has detailed were entitled to be denominated active hemorrhagies." It

is to be observed, however, that no notice has been taken in their details of any hemorrhage from internal organs, exudation of blood from delicate membranes, or of deep-seated pains. The state of the stomach, bowels, and secretions, are also omitted, the tongue only being noticed as a little furred, so that it must be admitted that this was a case of the mildest and most insignificant form, and not constituting evidence of much weight in the question.

With reference to the cases detailed by Dr. Bree, it would appear that the conjoint influence of bleeding and purgatives rescued the patients from apoplexy and paralysis, as well as the disease under consideration. In every instance, however, the simple detail of the facts affords abundant evidence, that most essential benefit was derived from the use of purgatives, though the character of the evacuations is not noticed by the author, and, notwithstanding the opinion he has given, that "Purpura may arise from compression of the brain giving occasion to the want of a contractile power in the fibres of the extreme vessels," we cannot, with due regard to that rigid examination of evidence necessary to lead us to correct ideas on a subject of so much importance, fail to observe, that in the

first case, Petechiæ had shown themselves three weeks before "a debility of the whole system had increased, so as to bear the character of paralytic weakness;" or that in the second, intended to be explanatory of the theory of the cause of Purpura above quoted, the patient had been several times affected with slight symptoms of paralysis, which had *given way to purges of calomel; that she had been oppressed with bile, and relieved by copious discharges from the bowels in the early part of her complaint;* or that, although this state may have been followed by confusion of the head and affection of the organs of speech, *accompanied by diarrhœa*, reasonable doubt may be entertained that that diarrhœa, even though it may have been relieved by bleeding, depended on the same state of vessels on the surface of the bowels, or internal organs, as that which admitted of actual extravasation of blood on the surface of the body: not that we mean to question the possibility of relaxation of the vessels of the mucous surface of the bowels or elsewhere, as produced by oppression of the brain, but simply to observe, that something more than mere relaxation is necessary to admit of that actual extravasation of blood on which Purpura is well known to depend; and that it appears probable that

the apoplectic state of Dr. B.'s patients depended on the same cause as the petechial spots; namely, a high degree of disorder of the digestive organs: the absence of any notice, however, of the state of tongue, or character of the secretions, leaves us much to wish for in the shape of evidence.

Dr. Harty's communications are of a different character from the preceding, and in my estimation, when added to the evidence produced in the cases which follow them regarding the uniform efficacy of purgative medicines, and the character of the evacuations, amount almost to a proof that this formidable disease, whatever may have been the predisposing causes, is immediately brought about by obstruction in the hepatic circulation, and consequent impediment to the functions of the stomach and alimentary canal. In no instance does it appear out of the whole recorded, where any attention to the state of the evacuations was paid, that the latter did not exhibit the most unequivocal proofs of congestion in the liver, and highly disordered biliary secretion, such as have been noticed by Dr. Harty. As the abbreviated manner in which the details of Dr. H's cases have been worded enables me to give them at length, without infringing on the

spirit of a work professing to be entirely practical; their sterling worth and great importance in the question under discussion, renders it an imperative duty on me so to do.

“Case 1. The subject, an unmarried female servant, about thirty years of age, rather corpulent; having, till of late, enjoyed apparent good health. Indigestion and a gnawing pain at the pit of the stomach constituted her chief complaints when I first saw her. In about three weeks petechiæ appeared, soon followed by slight and occasional hæmorrhage. The case, both in its commencement and progress, so closely resembled the very accurate description of purpura hæmorrhagica given by Dr. Willan in his reports, p. 90, that I need not detain you by a long detail of symptoms. Entertaining a high and well-merited respect for Dr. Willan’s authority, I strictly followed his mode of treatment. The kindness of friends liberally supplied her with nourishing diet and tonics; and, with the advantages of country air, I have reason to believe that all my injunctions were fairly complied with. In vain;—the hæmorrhage became daily more and more profuse and difficult of suppression. After suffering immense losses of blood, from every organ successively, she gradually sunk

under the struggle. The fifth month terminated her sufferings. I was refused permission to examine the body after death; a refusal I have not yet ceased to regret.

“ Case 2. The subject, a delicate woman, about the same age, worn down by frequent parturition, poor diet, bad air, deficient clothing, want of cleanliness, and confinement to a cold, damp ground floor. The disease set in with a severe attack of cholera: in two days after, petechiæ appeared, quickly followed by hæmorrhage from the mouth, nose, and stomach. Convinced of the inefficacy of mere tonics in bad cases, and forcibly impressed by the occurrence of cholera previous to the appearance of petechiæ, and by a recollection of the *remarkable pain in the epigastric region*, which so generally precedes them, I determined, in this case, to direct my whole attention to the state of the abdominal viscera, and accordingly prescribed a brisk purgative of calomel. From the good effect of the first, I directed its repetition for a few successive nights. To my surprise, the hæmorrhage soon ceased, the spots rapidly disappeared, and, in less than ten days, the patient recovered, under every possible disadvantage of constitution, of air, and of diet.

Encouraged by the unexpected result of this unpromising case, I now no longer hesitated in employing purgatives, and trusting to them only in both species of the complaint.

“Case 3. A boy about three years old, on whose face and body large purple spots appeared, when three weeks convalescent from scarlatina. There was occasional, though not profuse, hæmorrhage from the nose, gums, and fauces. Calomel and jalap were liberally administered for four successive nights. The feces were black like pitch, and highly offensive. After each purgative there was evident improvement. The feces assumed a more healthy appearance; and, by the sixth day, a single spot was not to be traced on the whole body. These are the only cases of purpura hæmorrhagica that have fallen under my care. Of the purpura simplex, I have seen about ten cases, all of which readily yielded to the same plan. The most obstinate case was that of a girl of eleven years, on whom the petechiæ appeared without any previous illness, if we except a slight degree of languor and heaviness. The spots were more numerous, and more generally diffused than I have witnessed in any other instance; in two days they had reached their acmè,

and were then accompanied by head-ache, quick pulse, and foul tongue (the only case in which I had seen fever present). It was necessary to purge this patient to a greater extent, and to employ much stronger doses than usual, to effect that purpose. The purgatives were continued for eight successive days, at the expiration of which period every symptom of disease had disappeared; and, without the aid of other medicines, the patient was restored to better health than she had hitherto enjoyed. All the cases of purpura simplex were under fifteen years of age, and all among the children of the poor. In some, the eruption had continued three or four weeks before purgatives were tried; and, in all, the stools were dark-coloured, though not so black as in purpura hæmorrhagica. From my own experience, I can add nothing further on this subject; but I can state, that, having made an early communication to the other physicians at the Dispensary, the practice was adopted by some of them with a success equally marked and rapid. One of them, (now no more), employed calomel only. A physician, attached to another Dispensary, informed me of his having successfully employed purgatives in one case, attended with enlarged abdomen, and complaints of pain in

it,—circumstances which led to the use of that remedy.”

In the first of Mr. Rogerson's cases, nothing was observable in the constitution of the patient which could lead to a supposition that mere debility of system was the sole cause of this disease; if that had been the case, indeed, the result would have proved the fallacy of the opinion, as recovery took place without measures of a tonic kind having been had recourse to: the pain in the head, oppression at the stomach, nausea, and colour of the tongue, together with the constipated state of bowels, were sufficient indications of disorder in the functions alluded to to lead to the exhibition of purgatives, from the action of which the relief was so immediate, “that even her attendants were convinced of their utility.” Cold ablutions were resorted to in both the cases which he details with apparently good effect; but the rapid disappearance of the whole of the threatening symptoms from the time the bowels were freely opened, leaves little doubt that the life of the patient was saved entirely by the adoption of measures leading to this object. In the second case, no ground exists for believing that the abstraction of blood at all

contributed to the recovery of the patient; nor is any notice of a beneficial change following it alluded to by the writer. As in the former, improvement rapidly went on after the powders (calomel and jalap) "had operated freely, and produced many stools of a dark colour, and intolerably offensive;" nor was any idea of the necessity of tonics to the cure suffered to suggest the use of even a little porter and animal food, till the petechiæ and all other symptoms had entirely disappeared. In both cases, the most dangerous set of symptoms had established themselves; the sudden recovery from which, after the operation of purgatives, does not appear to admit of explanation, except by referring them directly to congestion and disorder of the liver, stomach, &c. Indeed the character of the secretions merely is sufficient to establish that fact.

Dr. Buxton's case, as will be seen by reference to the table, approaches very nearly in the chief distinguishing features of the disease to those of Dr. Harty and Mr. Rogerson. The same beneficial effect followed the use of brisk purgatives, and the evacuations were of a dark olive green colour: a colour, according to Dr. B.'s impression, not dependent on any mixture of blood with the secretions.

Two important facts worthy of observation in this case is, that the tongue was tolerably clean, and the bowels regular. The absence of symptoms of such importance in the indication of disorder of the digestive organs might have led to a different practice from that adopted, had not the appearance of the complexion led to the suspicion of the truth.

The use of calomel and jalap is as unequivocally followed by rapid improvement in the case recorded by the Editors of the Medical Repository, as in the foregoing; and the same doubt seems to hang over the point as regards the benefit or necessity of bleeding, as in the last case of Mr. Rogerson: the evacuations here also were of a dark green colour, and copious.

The next in succession are those of Dr. Nicholl, whose experience of the utility of the oil of turpentine in a variety of other affections has led him to submit it to trial in that before us. When the patient first-mentioned came under the doctor's notice, he had been well purged by the directions of another medical man previously in attendance. This discipline was ordered to be repeated by means of calomel and jalap, and on the following day he began to take the turpentine, night and morning, and rapidly

recovered. The second case is precisely similar to the first in all essential points: no notice is taken of the character of the evacuations, except during the recovery of the second patient, when they are stated to have become natural. Nor is the *modus operandi* of the turpentine either theoretically or practically alluded to, and we are left to conjecture whether it is to its stimulant, diuretic, or cathartic properties that we are to consider ourselves indebted for the cure. In the first case, a great part of the object seems to have been accomplished, if our ideas, which the preceding cases have suggested, are correct, before the turpentine was employed: it is to be supposed, however, that the latter kept up the purgative action of the bowels in both cases.

In the very violent and speedily fatal case given by Dr. G. Johnston, *no passage through the bowels had taken place for a week previous to the first visit of this gentleman to the patient*; and the symptoms probably were rendered the more violent on this account. Injections, large doses of the pil. colocynth comp., and of calomel and jalap, produced no effect on the bowels of the patient, and fourteen ounces of blood taken from the arm was followed only by temporary relief. *The patient died without*

having had the bowels excited. The blood drawn exhibited only slight traces of coagulable lymph; nor did the *post mortem* examination lead to any discovery of the products of inflammation in any internal organ. The petechiæ were distributed over the heart, stomach, and other viscera in great abundance.

Dr. Duncan, jun. has added to the case last mentioned in the Ed. Med. and Surgical Journal, one which he himself treated some time previous, by referring to the abstract of which in the table, a similar striking disappointment in the expectation of permanent benefit from bleeding will be noticed. This operation appears to have been had recourse to on Dr. D.'s patient, in consequence of its having been apparently beneficial in the cases of Dr. Parry, and to have been repeated on the supposition that the "return of the hæmorrhage was from the impulse, *à posteriori*, being greater than the tender state of the vessels could bear." It appears more than probable that this last abstraction of blood was very prejudicial, it having been followed by great prostration of strength at a period when a great demand for the latter was made on the constitution of the patient for the purposes of bringing on a healthy state of parts

after a gangrenous slough in the throat. The effect of purgatives, whenever employed, was the production of black and fetid dejections, the character of which never changed for the better after the first appearance of the spots and hæmorrhage.

The case more recently detailed by Mr. Pretty is remarkable on many accounts. Before the Petechiæ appeared, the tongue was furred, there was pain in the epigastrium, and sickness, and the bowels had not been opened for two days, when several evacuations were produced by purgatives, which however did not relieve the pain, though they appeared to have abated the sickness. The breathing, on the contrary, was more frequent, the pulse harder, and the fever increased when bleeding was had recourse to, and nitrate of potash with antimonial powder prescribed. The next day, symptoms of formidable congestion about the chest and head had taken place, *but the bowels were free.* The Petechiæ had increased, but the symptoms of congestion appeared to call for a repetition of bleeding, which was performed to the extent of 10 or 12 ounces, and followed by syncope and temporary relief: again the fever and bad symptoms returned, and the mineral acids were had recourse to, under the direction of Dr. Johnson: death,

however, took place, preceded by the symptoms of the last stage of pulmonic inflammation. A part of the blood drawn at the second bleeding only, exhibited a buffy surface. The *post mortem* examination disclosed no vestige of recent active inflammation of any internal organ, but merely the appearances of congestion. It is much to be regretted, and this remark is made without the slightest intention to condemn any part of the proceedings in this case, that the state of the secretions had not been more fully noticed, and the use of purgatives carried to a greater extent. The hepatic congestion and stomach disorder indicated by pain in epigastrio, sickness, constipation, and furred tongue, which ushered in the disease, may, in the minds of some, stand in the situation of an exciting cause to all the subsequent commotion and mischief which occurred. It would have been more satisfactory, if notice of the state of the liver and gall bladder had been taken in the dissection: whereas the only remark connected with the functions of these parts is, that about three ounces of green fluid was found in the stomach. This case, therefore, throws little or no light on the pathology of purpura: it is, indeed, only calculated to eradicate the little growing confidence which

the perusal of those preceding is calculated to inspire: that the bleeding was carried as far as it could be with propriety, without benefit, is evident; and it appears almost equally certain, that we lack that positive and decided information which is either calculated to shake or confirm the opinion of the influence of disorder of the digestive organs, in establishing the disease, and the efficacy of purgatives in curing it.

Dr. Duncan concludes the recital of his patient's case, by observing, that the possible modes in which he can conceive this disease to arise, are

1. Increased tenuity of blood, allowing it to escape from the superficial extremities of the minute arteries.
2. Dilatation of the mouths of these arteries allowing natural blood to escape.
3. Tenderness of the coats of the minute vessels giving way from the ordinary impetus of the blood.
4. Increased impetus of the blood rupturing healthy vessels.
5. Obstruction in the vessels causing rupture, with natural impetus, and without increased tenderness.
6. Two or more of these causes may act simultaneously or successively.

He observes, however, that he cannot reconcile any of these suppositions with the phenomena of the disease; but with respect to the third more particularly, I think a consideration of the cases detailed individually and collectively will enable us to discover, not only satisfactory proofs that this is really the fact, but an adequate explanation of the manner in which it is produced.

In the first place it will be observed, that a striking uniformity of symptoms indicating hepatic congestion and general disorder of the digestive organs; of those organs, on the proper performance of the functions of which, the formation of blood capable of conveying nourishment and the materials of growth to distant parts of the body entirely depends; occurs in all the cases of serious importance which we have noticed. That these symptoms, consisting of constipation, dyspepsia, oppression of the chest, pain and tenderness in epigastrio, head-ache, &c. have been pretty clearly ascertained, both by the state of pulse during life, and by examination of these organs after death, as well as by the absence of important marks of inflammation in the blood drawn by venesection, not to depend on a state of actual inflammation; while the constant effects of purgatives in dislodging vitiated

secretions, consisting chiefly, apparently, of accumulations of black biliary matter, has been pretty uniformly followed by the most strikingly beneficial change in the symptoms.

The effects of remedies exhibited on principles founded in particular theories are usually tolerably correct tests of the truth of such theory, and, though instances, doubtlessly, often enough occur where the constitution bears up against both disease, and medicines given under incorrect and dangerous notions of disease, or what is as bad, given without any knowledge or care about the matter; yet such instances may be, perhaps, considered only as exceptions to a general rule. It is only necessary after this remark to direct the reader's attention to the comparative good or evil of blood-letting, of the opposite system of tonics, and the use of purgatives, as exhibited in the table, taking due notice of the cases which have been extracted from Dr. Harty's paper.

The direct cause of P. Hemorrhagica does not appear in any case which I have been able to discover to depend on debility of system merely. Privation of food had not been experienced to any considerable extent in any of those immediately before us, and it may be

doubtful whether or not a certain degree of energy of circulation may be requisite to cause the escape of so much blood as is necessary to produce the enlarged blotches on the surface, of this disease, and to explain the profuseness of the hæmorrhage from surfaces covered with more delicate membranes. The chief questions for decision seem to be, whether any thing like energy of circulation is consistent with that degree of debility and relaxation of the vessels of the skin where the tenderness of their coats disqualify them to resist the common force of the circulation; and if it be, upon what circumstances can the latter depend. Is the highest degree of hepatic and general visceral congestion and obstruction in the abdomen with which we are acquainted capable of so impeding the functions of digestion and chylication, as to become a cause of such reduction in the nutrient properties of the blood, as to render this fluid unequal to the efficient nourishment of every part of the system? If it is, in what parts of that system would the debility consequent thereon be first manifested?

With respect to the first of these questions, if a positive answer cannot be readily given in the affirmative, it is at least to be considered not improbable. For the second, it will

occur to us, that parts already built up by the previous healthy action of vessels, and not dependent on the latter every hour for their vitality; parts in a state of quietude and rest are not those in which such debility would be expected first to appear. The vessels themselves in ceaseless action, and constantly under the influence of a distending power, would, reasoning on common principles, of necessity, be the first to suffer. The *vasa vasorum* supply the coats of the vessels themselves no better than the latter supply other parts, and these, therefore, being called on to make greater efforts in resisting the impulse of the circulation, first disclose the general deficiency by the rupture of their extremities.

The occasional temporary relief to the hurried and laborious breathing and pain in the chest experienced from bleeding rather confirms than opposes this view of the case, necessarily followed, as the operation must be, by diminution of the congestion in the lungs, which these symptoms denote, and which may be fairly concluded to be the consequence of impeded circulation in the liver.

The particular circumstances worthy of observation on a view of the severer cases alluded to collectively therefore, are, 1. That congestion in, and deranged secretion of, the

liver, stomach, and bowels, are pretty uniformly disclosed either by symptoms directly referring to these parts, or by the colour and appearance of the evacuations. 2. That medicines calculated to remove such congestion have been as constantly followed by decided benefit; while recovery took place in no instance without free purging. 3. That the use of tonics is seriously detrimental, if not preceded by purgatives. 4. That the utility of bleeding is exceedingly doubtful, and that in no such cases has it been followed by any thing more than temporary alleviation, *except accompanied by purgatives*. 5. That the state of the pulse, together with the result of the *post mortem* examination in the two cases, in which the latter was had recourse to, justify the opinion, that actual inflammation forms no part of the disease, and, consequently, that the utmost good effect to be expected from abstraction of blood is confined to the temporary relief of congestion; and 6. That when recovery took place, it was without the use of tonics, such as bark and acids, or good living. Another case equally instructive on these points is recorded by Dr. Bateman *, in which the decided superiority of evacuating

* Ed. Med. and Surgical Journal, vol. ix.

remedies, and the danger of bleeding, are both strikingly exemplified.

There are two other species of Purpura described by Dr. Willan, the *P. Urticans* and *P. Contagiosa*. The peculiarities of the first appear to be of hardly sufficient importance to justify a separate name or consideration. The vibices constituting this affection seem to form more rapidly than usual, and after rest and quietude to be diminished in size by absorption. When they are first formed, they are elevated a little above the surrounding skin; but a night's repose reduces them to the level of the latter, when they exhibit a more livid hue than on their first appearance. The *P. Contagiosa* is merely the *Petechiæ* of low fevers.

Before we dismiss the subject of Purpura, we may be permitted to notice, as somewhat connected with it, the observations of Dr. Desmoulins on the anatomical state of the skin and subcutaneous cellular tissue in yellow fever*. This gentleman adopts the opinion of Dr. Ffirth as to the character of the black vomit; that instead of consisting of vitiated secretions, it is formed entirely by vascular exhalations from the inner surface of the

* Medical and Physical Journal, vol. xlvii.

stomach. A series of arguments not very conclusive leads to the opinion on the part of Dr. D., that a state of congestion of the vessels on the surface, analogous to that which allows of the escape of parts of the blood into the stomach, is the cause of the yellow colour of the skin in the fever alluded to, and that this state of such vessels is only prevented from terminating in actual rupture of their extremities, and the formation of petechiæ, by the closeness of the texture of the skin. A perusal of the paper alluded to will disclose some deficiency of sound reasoning on both the points mentioned; and it is curious to remark, that the chief argument in proof of the first, namely, that the matter of black vomit is always composed of blood, rests on the fact of its having been found in a stomach where the pylorus was closed up by scirrhus, and where, as is asserted, it was impossible for vitiated bile to get into this organ. It is not assuming too much to say, that a very trifling degree of knowledge of the phenomena of scirrhus pylorus would enable any one to afford a better explanation of the manner in which the blood came there, than by connecting it with the fever.

The question as to the identity of Purpura with the common scurvy appears, on account

of the support it has derived from the authority of Dr. Willan, to require some notice in this part of our subject. On a first view of the cases which I have selected to enable my readers to form their opinion of Purpura, it would appear that, except as regards the cutaneous affection, but little resemblance existed. Whatever may have been the particular theories of individuals as to its causes on board ship; whether the bugbear, putridity, in any thing like the literal sense of the word, may really be capable of existence in the living body, as supposed by Pringle; whether simple debility from privation of nourishment, according to Drs. Lind, Blane, and Milman, or privation of oxygen, according to the theories of Trotter, Goodwin, Beddoes, and others, may have had the power of inducing scurvy; yet it must be remembered that this latter disease has always been most distressing in cold weather, even when the circumstances by which any of such states may be brought about were much less in action than when the ship in which it has made its appearance has been much longer out, if arrived in warmer latitudes: a fact, which is of serious importance in the investigation of the pathology of scurvy, and one which every surgeon of an East Indiaman, making a tedious

voyage to India, may have opportunities of observing, though on a small scale.

The very trivial forms, however, in which the disposition to scurvy makes its appearance in well-regulated ships at the present day, scarcely enables us to identify it with the formidable disease described by the authors alluded to; but on such voyages as those named, sufficient opportunities sometimes occur to show that confinement to salt provisions ought only to be considered in the light of a predisposing cause. On such voyages, where the provisions have not been carefully selected, a period of seven weeks or two months at sea, about which time the ship arrives off the Cape of Good Hope, brings generally a few cases of scurvy on the sick list. Stiffness of the hams and legs, debility, and a vesication or two, usually about the knees, with uneasiness at the pit of the stomach, a doughy thickening of the skin and integuments of the lower extremities, and constipation, are, however, the only symptoms noticed; and as the ship approaches the termination of her voyage, these usually disappear. It should be observed, that limejuice is always furnished on board the ships in question; but this is not sufficient to protect the crews from the slight attacks described.

The fact that the disease begins to disappear, without important alterations in the diet of the patients, as they approach warm weather, has appeared to me to be attributable to the more regular action of the bowels, brought about by the increased flow of perspiration and biliary secretion consequent thereon, the direct effect of which must be to remove the congestion in internal organs, on which the constipation and uneasiness in the epigastrium depend. My own observation in such voyages has induced me even to consider the minor degree of nourishment contained in salt provisions as of far less importance in inducing the disease than the absence of that gentle excitement to the bowels which vegetable substances are known to produce. I admit, however, that meat which has been long salted, and which, consequently, has suffered a material diminution of its nutrient properties, is considerably more liable to induce the disease than that which ought to be served out to seamen in long voyages; that is, meat which has been salted as recently as possible before the ship sails*; but in such

* In the season of 1815 and 16, I had an opportunity of experiencing this remark on a large scale. Two of the ships of that season were largely supplied with beef and pork ob-

cases a more than usual obstinacy of disposition to constipation is constantly observed.

The light which has been lately diffused over the pathology of dysentery by the highly-gifted author of "The Influence of Tropical Climates on European Constitutions," will enable us to see a considerable similarity in some essential points between this disease and that under consideration, or, at least, that a scorbutic disposition is peculiarly liable to dysentery; hepatic obstruction and deranged biliary secretion alike distinguishing both; and it may not be improbable, that in some cases the inflammatory symptoms of dysentery supersede those of scurvy only, because a greater degree of susceptibility to irritating causes exists in the constitution of the patient. The uniformly good effect of mercury in the treatment of dysentery may appear to militate much against this idea, and it must be acknowledged that its correctness

tained at the sale of some old naval stores. The cases of scurvy, while the men were fed with these, became alarmingly numerous and severe, and the commander of one, after expending the whole of his live stock in remedying the mischief, thought it unsafe, from want of hands, to attempt the passage round the Cape of Good Hope. In the other the mischief was less extensive; but constipation, hepatic congestion, and black evacuations occurred in every case, in many instances followed by dysentery.

could not be established with safety to some received notions of the pathology of scurvy, because a mercurial course must for a time further depress the energies of the system; but, on the other hand, its *modus operandi* is well known to consist in restoring a healthy secretion of bile and a regular state of the bowels, the importance of which appear to have been, in scurvy, but too much overlooked.

The cutaneous affections of scurvy, as has been before noticed, as the disease occurs at the present day, are a thickened doughy feel of the skin of the lower extremities, with dark-coloured blotches, and frequently the formation of a bulla containing bloody serum. The situation of the latter is usually about the knee, and I have been induced to think it frequently produced by kneeling, or by some slight contusion against the rigging in going aloft. The cuticle of the vesicle is generally broken when it first comes under the eye of the surgeon, and part only of its contents remains. Its striking similarity to the Pompholyx, together with the fact that the latter is often intermixed with petechiæ, and originating in debilitated habits, establishes the opinion as to their dependence on states of the constitution somewhat similar.

It is not difficult to conceive that a degree of relaxation in the vessels of the cutis, somewhat less than that which renders the mere impulse of the circulation equal to their rupture, as in petechiæ and vibices, will admit of the escape of the serous portions of the blood only under the cuticle; and this appears to be the manner in which both the vesicle of Scurvy and the common Pompholyx originate. In the former, however, blood to some extent always escapes, and is mixed with the serum, giving it the appearance of bloody water.

The doughy thickened appearance of the skin is, I believe, rather the conjoint effect of an interruption of the action of the absorbents of the part, with a slight escape of serum from minute vessels of the cellular membrane. Neither of these affections admit of any alleviation, except through the medium of the constitution.

CHAPTER V.

Of Pemphigus and Pompholyx.

THE existence of the disease termed Pemphigus, or, in other words, of fever of a specific character, marked by an eruption of

vesicles containing a colourless, or light yellow fluid, has been doubted by the best authorities; nor have the learned researches of Willan, Bateman, and others, led to any other disclosure, than that such cutaneous affections have now and then occurred in low fevers. To the authorities quoted by these authors in elucidating this matter may be added that of Rhases, who has described it as occurring under such circumstances. According to the latter, it shows itself in small bladders resembling burns, preceded by redness and itching, and terminates in ulcers covered by a dark brown crust. The name, however, has been handed down to us from the time of Sauvages; and within these few years several cases so denominated have been recorded in periodical and other publications; but these may be seen, on attentive perusal, to be merely cases of Pompholyx, attended by accidental febrile symptoms. The character of the latter, under which the eruption has appeared, has been in some instances simple at first, and terminating in that of Typhus*: Drs. Porter†, Dickson‡, and Bateman§, ap-

* Mr. Frogley's case, vol. xxxi. Med. and Phys. Journ.

† Edinb. Med. and Surg. Journ. vol. xv.

‡ Ibid. vol. ix.

§ Synopsis of Cutaneous Diseases.

pear, however, to agree in the above opinion as to the absence of any direct connexion between the cutaneous affection and the fever attending it; and any allusion to the question of recent date, which I have been able to discover elsewhere, seems to afford some evidence or other of its correctness.

If the non-existence of the disease termed Pemphigus be admitted, some modification of the description of Pompholyx by Dr. Willan must necessarily be instituted, as it appears from this author that the latter consists of an "eruption of bullæ, without any inflammation around them, and without fever."

In a very large proportion of the cases which have been recorded of this disease, some acceleration of pulse or other marks of general irritation have preceded it, while it is often appearing in protracted illnesses, and is then to be looked upon as a mark of the exhaustion produced. The term Pemphigus, from the union of these symptoms with the cutaneous affections, seems to have been often improperly applied.

When the appearance of the vesicles of Pompholyx is not preceded by severe indisposition, it is ushered in by languor, lassitude, and feelings of general debility.

It usually first attracts the notice of the patient in the form of a small vesicle about the size of a pea, which in twenty-four hours becomes as large as a walnut, at which time it is commonly broken with the smallest degree of violence. Two or three of these may perhaps be seen at a time on different parts of the body, but their most frequent situation is on the lower extremities. Here and there a small red speck, evidently formed by the rupture of a minute vessel on the surface of the cutis, is discovered intermixed with these, which is to be considered the incipient state of the vesicle. The extravasation of blood is sometimes sufficiently great to give the latter a bluish colour, precisely resembling the vesicle of scurvy described in a preceding page, when, its contents being let out, they assume a resemblance to bloody water. In other cases the fluid consists merely of yellowish serum*.

It does not appear to be confined to any particular class of individuals, but is, notwithstanding, much more frequently seen in young people of delicate constitutions, and

* Both these appearances are well represented in plate xxxiii of Bateman's delineations, in the figures B and C on *P. diutinus*.

accustomed to sedentary habits, than in others. If the disease is seen and properly treated at the commencement, it soon disappears; but if this has not been the case, "the bullæ continue to arise in succession on different parts of the body, and even re-appear on the parts first affected, in some cases for several weeks, so that the whole number of bullæ is very great, and when the excoriations are thus multiplied, a slight febrile paroxysm occurs every night, and the patient suffers much from the irritation, and from want of sleep." The character of the excoriation formed by the rupture of the vesicle depends entirely on the degree of constitutional derangement. Sometimes a new and sound skin covers the part in a day or two; in others, it is followed by a superficial sore, surrounded by a red border: while, when it occurs after fevers of debility, it becomes white, sloughy, tedious, and painful.

A state of the system or of internal organs seriously interrupting the process of chylification, and in which consequently the nutritive properties of the blood are much reduced, is as favourable to the production of Pompholyx, as of Scurvy and Purpura; and the analogy of the former to the latter is

proved by the badly nourished state of the vessels of the cutis existing in it, the slightest pressure being generally enough to break them down sufficiently to produce a bruise of the part.

These observations refer generally to Pompholyx, as it usually makes its appearance; but there are three instances recently recorded of its having shown itself in the form of an epidemic. In two of these the disease has been termed Pemphigus, but, for the reasons detailed, it has been thought proper to notice them here. In truth, the question as to the existence of the fever termed Pemphigus seems of so little practical importance, as to fully justify this line of proceeding.

The first instance is reported by M. Petiet, in the *Journal de Medecin*, in 1813. It appears, that out of 294 persons comprising the population of a village, thirty-five cases of the disease occurred. It made its appearance with symptoms of a slight febrile character, and itching in different parts of the body, which continued three days before the vesicles appeared. When the latter were broken, the excoriated cutis exhibited a violet brown colour. In some cases, the febrile symptoms approached the character of Typhus;

but recovery took place in all cases under the use of refrigerant saline medicines.

The second, observed by Mr. Daniell, of Weldon, in Northamptonshire, in which neighbourhood it occurred*, approaches in similarity to the preceding. A number of haymakers "were all severally attacked with this disease in a more or less degree; some so lightly as not to require medical assistance, while others were so alarmingly affected as to excite apprehensions.

"The symptoms of its commencement were similar to a common attack of fever, attended with burning heat of the skin, which was only relieved by the appearance of the vesicle. In the several cases, the blister exhibited a puckered appearance, scarcely any becoming larger than the size of a nut. The progress to vesication was extremely rapid, and in the course of a few hours a thin *excoriating ichor* issued from them, exciting great inflammation, swelling, and uneasiness. The general symptoms were violent sickness, pain or giddiness in the head, prostration of strength, lassitude and general anxiety, aching pain in the limbs, and frequent rigours."

It seems not improbable, that some ve-

* Medical Repository, vol. vi. p. 277.

getable poison, with the operation of which we are not at present acquainted, in its local application, may have exercised its influence in bringing on the disease in the cases above described, as the subjects of it had been employed away from the other part of the labourers in pulling docks. Such seems indeed to have been their own impression as conveyed to Mr. Daniell. The irritating properties of the fluid of the vesicles, coupled with the exposure to the sun, under which they must have followed their occupation, would have warranted a suspicion, that the action of heat on the surface may have been the exciting cause; but the vesicles were alike extended over parts well protected by clothing, and those most exposed.

An emetic, followed by aperients and saline medicines, only seems to have been necessary to the cure.

In 1816, according to the editors of the London Medical Repository*, Pompholyx appeared as an epidemic at Chelsea, and extended several miles on each side the river.

Calomel, joined with other purgatives, and followed by light tonics, quickly brought about recovery.

* Vol. vi.

The foregoing description of the disease given by Mr. Daniell and M. Petiet corresponds generally with those of Dr. Dickson and Dr. Porter*, varying only in the degree of severity of the symptoms. Dr. Porter observes, that in the case which he has detailed, the tunica conjunctiva was much inflamed, and the exposure to light caused a copious flow of scalding tears. A similar observation is made in the first case detailed by Dr. Dickson; in two others on record also, similar inflammation has been observed.

Anxiety of mind has, in some cases, appeared to exercise considerable influence among the predisposing causes of Pompholyx† as well as of scurvy‡; and where this has manifestly existed during the treatment, the cure has been much retarded.

The constitutional treatment adopted must, of course, be modified according to the existing symptoms. The character of the fever with which the disease is accompanied will in-

* Edinb. Med. and Surg. Journ. vols. x. xv.

† Mr. Mayd's case, vol. ii. Med. Repos. The bladders in this contained a fluid resembling "water in which meat had been washed;" an appearance noticed in a preceding page.

‡ See the case of Charpentier, alluded to in the xiiith vol. of the above, the works of our early voyagers, &c.

fluence it to a certain extent ; but the general principle laid down for the management of Purpura, in the use of purgatives, is in all cases perfectly applicable here, whether accompanied by fever, or unattended by marks of great constitutional disorder. The same species of deranged biliary secretion, though not to so great an extent, has been generally noticed where the evacuations have been examined ; but such derangement is removed with considerably less difficulty. When things are in a proper state in this respect, the febrile symptoms become mitigated, and the patient receives much benefit from the use of tonics.

The local treatment should consist of puncturing the vesicle as soon as it has attained such a size as to be in danger of being inadvertently broken, and protecting the collapsed cuticle from being rubbed off, or disturbed. Where the fluid which it contains is not acrid and irritating, this plan will not be followed by any bad effects ; though in such instances as those of Mr. Daniell, which have been alluded to, it may perhaps be proper to have recourse to medicinal applications to the surface of the abraded cutis. The utility of the common warm bath is rather question-

able; but the sulphur vapour bath has been in one instance found eminently useful at the Infirmary for diseases of the skin*.

The disease termed by Dr. Willan *Pemphigus infantilis*, and by Dr. Stokes† *P. gangrenosus*, wears the character of a very aggravated state of *Pompholyx*, with great debility and low fever. According to the former, it “exhibits irregular oblong vesications, or *phlyctænæ* of a considerable size, and generally flattened at the top: they are at first small and transparent, but as they enlarge, the fluid contained in them assumes a purplish hue, and finally becomes turbid from a slight admixture of pus. They are also surrounded by an inflamed border of a livid red colour. This eruption sometimes appears in infants two or three days after birth, on the neck and upper part of the breast; on the abdomen, groin, scrotum, and inner parts of the thighs: it has been known, however, to have occurred so late as ten months after birth. When the fluid is discharged after the vesications break, the ulcerated surface is not disposed to heal, but spreads beyond its original boundary, and be-

* Report of Infirmary for Cutaneous Diseases.

† Med. and Phys. Journ. vol. xix.

comes extremely painful. As the vesications arise one after another in different places, and are all seconded by ulcerations; the disease continues with little remission for several days, generally till the patient expires under the complicated distress arising from pain, loss of sleep, and violent fever. The children thus affected are often weak and emaciated, with a dry shrivelled skin*."

In Ireland, according to Dr. Stokes, among the children of the lower class of the poor, it is very commonly seen, and the part most particularly stated as its seat is the back of the ears, but it is by no means confined to this situation. "It occasionally prevails epidemically, and is then preceded by a livid suffusion, slightly elevated above the surrounding parts. In the progress of the disorder, the ulcers enlarge rapidly, are attended with remarkable fætor, very great discharge, and livid edges; and if they are situated behind the ears, they destroy the connexion of the posterior cartilage, with the cranium, spread to the meatus auditorius, to the eyes, (the sight of which seemed, in a few cases, to have been destroyed one or two days before death), and sometimes to the vertex."

* Willan on Cutaneous Diseases, p. 537.

Great constitutional irritation is produced soon after the vesicles burst; the energies of the system rapidly decline; death takes place about the tenth or twelfth day, and is often preceded by convulsions.

The period at which the disease usually makes its appearance is, according to Dr. Stokes's information, from the third month to the ninth year; while Dr. Willan describes it to be limited to the first year. This variation, however, may be perhaps explained by the difference in the habits of the people, and in the quality of their food.

The frequently fatal termination of the disease witnessed by Dr. Stokes under ordinary professional management, determined him to have recourse to the recipe of a female reported to be possessed of a nostrum of great efficacy in its treatment. The preparation in question was a green vegetable ointment composed of a farrago of different plants; it had been used with much success by the country people, and the inquiry set on foot by Dr. S. induced him to think that it was indebted for its virtues to the *scrophularia nodosa*, or great figwort, which formed a part of its composition. An ointment therefore, made entirely of the latter, was subsequently employed, and was directed to be

made use of, preceded by a poultice of oatmeal and porter : the latter to have remained on eight hours before the first application of the ointment. "It should be as highly saturated with the green vegetable matter as possible, and when applied, it should be melted, and suffered to cool to the consistence of honey ; it should be applied with a soft feather, and with the utmost gentleness to the whole surface of the sore." The internal use of yeast is recommended by Dr. S. in conjunction with the above ; and he concludes his observations by remarking, that this plan of treatment is decidedly superior to any constituted of the applications usually had recourse to on common surgical principles.

CHAPTER VI.

On Ecthyma and Rupia.

FIVE species of Ecthyma, all of which occur under the same states of constitution, have originated with the classification of Dr. Willan, and four of them are beautifully represented in Dr. Bateman's 43d and 44th plates.

The general description is as follows: "An eruption of the inflamed pustules, termed Phlyzacia *, usually distinct, and arising at a distance from each other. It is commonly indicative of some state of distress under which the constitution labours, and though it is not attended with actual fever, yet a degree of general irritation or erethism is often present with it."

Anxiety of mind, accompanied by great bodily exertion, fatigue, low living, the debilitating effects of previous fever, in short, any thing reducing the energies of the constitution beyond a certain extent is capable of producing it, and it is clearly dependent on a similar state of the vessels of the skin to that giving rise to the formation of Petechiæ.

Almost the whole of the cases which I have had an opportunity of observing have occurred in young people; the majority in young men, who, with constitutions originally not of the strongest class, had imprudently indulged in excesses and irregularities to a very great extent, accompanied by privation

* A pustule, commonly of a large size, raised on a hard circular base of a vivid red colour, and succeeded by a thick, hard, dark coloured scab.

of rest and other depressing circumstances. Very frequently in such cases it is mistaken for a venereal eruption, and the patient himself is readily made to believe in an opinion which his habits have made so probable. If mercury be had recourse to, the dried scabs of the disease grow on the part rapidly, becoming of a dark brown colour, exceedingly hard, and of a conical form, presenting, in fact, on a minute scale, the characters of the disease termed *Rupia* *.

Measles, scarlatina, and many other diseases followed by debility, occasionally become exciting causes of *Ecthyma*, in which case the patient, instead of rapidly regaining his strength, is visited simultaneously with the appearance of the eruption, with that restlessness and hurried pulse before described. This state of things, in a trifling degree, sometimes exists for days after the original disease has disappeared without attracting much attention; and if the appetite of the patient is not impaired, eventually goes off. Now and then, however, instead

* Alibert has represented in his plates of *Dartre rongéante idiopathique* et *D. crustacée en forme de mousse*, a disease very much resembling the larger scabs of *Ecthyma* occurring under such circumstances.

of gaining strength, they lose flesh, pass restless nights, become exceedingly languid, and subject to regular attacks of hectic fever; and exhibit a countenance of much anxiety and distress.

When the disease makes its appearance in consequence of an increased degree of debility brought on by any eruptive fever, as measles, &c. it is usually seen in its very earliest stage about the waist. It exhibits a few reddened and slightly elevated spots, covered with a very thin lamina of cuticle, which readily separates. Some of these have a minute elevation in their centre resembling a vesicle: the latter, however, contains nothing like the serum of the herpetic vesicle, but a glutinous fluid, which dries upon the part, and forms with the morbid cuticle an elevated scab of a conical form, the basis of which in a day or two is surrounded by a small inflamed areola. The surface of this areola is soon covered with a lamellated scab, and a scale of considerable magnitude is thus formed. During the continuance of the disease, many of these scabs separate; and if the strength is improved, the part beneath returns to a healthy state. Now and then, however, this process is repeated several

times, and successive exfoliations continue to be produced.

The minute examination on which the foregoing description of the spots of Ecthyma is founded, has led me to think that the term pustule is very improperly applied to them. Taking into consideration the state of system existing in all cases as its predisponent cause, it would appear that an active inflammatory and suppurative action on the surface of the body is, of all events, one least to be expected to constitute the essence of the disease, and, accordingly, the kind of examination alluded to discloses a state of vessels materially differing from such an action. I have little doubt that in the formation of every spot of Ecthyma lesion of some minute vessel takes place, and that a kind of Petechiæ are thus produced. From some cause or other either depending on a minor degree of debility of system to that in which the Petechiæ remain quiescent, or on mere additional irritability of skin, attempts to repair the mischief are made by the vessels of the part, and inflammatory action takes place. A minute vessel thus ruptured has its extravasated contents mixed with the coagulable lymph poured out by the vessels labouring to repair the mischief, and the

mixed fluids dry on the spot, forming the minuter scabs. The powers of the constitution being unequal to the carrying this process through in an healthy manner, irregular attempts at suppuration take place, and the bulk of the scab is usually surrounded by, and partly mixed with a minute portion of ill-formed pus; even this, however, dries on the part, and increases the bulk of the scab. Many of the minute vessels concerned in this process are in too relaxed a state for the occasion, and their secretion is mixed with and deeply coloured by red globules of the blood which escape under the increased action. The scab itself now becomes a cause of irritation to the surface on which its basis rests, the bloody purulent secretion increases, becomes inspissated, and attached to the mass: the ulcerative process gradually destroys the surrounding cutis, and the margin of the sound skin becomes elevated and thickened. The scab, by the continuance of this process, is gradually elevated, and rapidly enlarges; a fresh and broader ring of growth being added to its base every three or four days. At this period it answers to the description of *Rupia*, and this latter named affection, though described by Dr. Bateman, as originating always in a vesicular form, has been

satisfactorily ascertained to be the termination of Ecthyma in two different cases which have come under my notice. This description, however, I believe, applies only to neglected or improperly treated cases of Ecthyma: in ordinary instances, the latter being gradually removed by quietude, tonics, and good living, and abstinence from any species of indulgence followed by exhaustion.

From the description of Dr. Bateman, it would appear that even when Rupia assumes the form of an inflamed vesicle at its commencement, the subsequent formation of the hard dark-coloured scab is still accomplished in the manner above described. The same states of constitution and conditions of vessels of the surface exist in the two cases, and the exudation of lymph from the debilitated vessels in forming the vesicle appears to excite attempts at inflammation in those adjoining, in the same way as noticed in the commencement of the scab of Ecthyma. The occasional dark colour of the scab in both cases had appeared to me to be produced by a mixture of blood with the coagulable lymph and other secretion constituting its substance, and I have since ascertained this to be the fact: when the scales of Ecthyma are rubbed off in a rude manner, and the skin is abraded on which they

were situated, a little blood escapes, but the same secretion continues mixed with the blood, and the scale is harder and considerably darker coloured: the formation of an ulcerated sore rarely follows such an accident.

Ecthyma, where the spots are very small and much diffused, is sometimes mistaken for itch. I have lately met with a case of this kind where sulphur had been used both internally and externally: the external application, however, did not aggravate the cutaneous affection, though it did not improve it. The patient rapidly recovered by the use of tonics and sea bathing. With respect to the propriety and value of the latter as a remedy, it may be as well to add, that in several other cases it has produced a manifestly beneficial effect, and I am induced to think that it may be had recourse to in all with great safety and infinite advantage. It appears to afford that kind of stimulus to the vessels locally which is desirable, as well as to act as a tonic to the system generally. Indeed it would appear at first sight obviously indicated, if the pathology of the disease, which I have endeavoured to give, be correct.

As far as I am able to learn, the enlarged, blackened, and prominent scabs of Rupia are

never seen but in the lower classes of society, where long protracted disease has produced a general wasting of the body, hectic fever, and other symptoms of the lowest degree of debility. In the last case of this kind answering to the *Rupia prominens*, which has come under my notice in the St. Giles's Infirmary, the patient had been long a martyr to syphilis. He had severe pains in his head and limbs, on which account he had lately been considered to require mercury. Under the influence of this medicine he grew worse, and the scabs rapidly enlarged—he discontinued it, and was allowed meat, wine, porter, and tonics, and rapidly recovered. In the debilitated state of this patient, and before the constitution had began to rally, I was induced to apply a strap of adhesive plaster upon the largest of the scabs, and to employ a little pressure, with a view of hastening its separation and preserving it: but on removing the bandage, the surface of the skin and base of the scab were found attached to each other by a stringy slough, which never separated till the constitution was greatly improved. I had been more successful in a former instance of this kind, and by dissolving the incrustation in warm water, ascertained that its substance was largely made up of blood, which had un-

dergone the process of exsiccation with the other fluid secretion. When the slough is removed from the surface of the sore, the latter exhibits a glassy inactive surface for some time, and the ulceration is usually found to have extended deep into the cellular membrane of the part. The growth of healthy granulations in such a case will be materially expedited by the use of the nitrous acid lotion: a pledget of lint wetted in this should be kept constantly applied, so as to fill the excavation.

SECTION III.

CHAPTER VII.

On diseases exerting a probably salutary influence on the system, originally produced by, and usually symptomatic of deranged digestive organs, and characterised by active inflammation.

It is perhaps a matter of much difficulty positively to ascertain what cutaneous affections among those now to be noticed can be with the greatest propriety arranged under the above head. A very considerable number may, however, be so classed without hesitation, and, indeed, the indirect connexion of all with such a state is sufficiently well known. It is only therefore meant by this arrangement to include those which are obviously enough so to be allowed to direct us at once to a principle of treatment.

The diseases known by the names of *Porrigo favosa*, and *P. larvalis*, stand first among these, and the consideration of the pimples of *strophulus*, *lichen*, and *urticaria*, may with propriety follow. The vesicular formed affections, *herpes* and *thrush*, and the carbuncular boil of the *cutis*, comprehend the remainder of this division.

The liberty which I have taken in the separation of the favous *Porrigo* from the other diseases bearing that name may appear to require some explanation. From the views taken in the preceding pages of the pathology of the more obstinate forms of what has been denominated *Porrigo*, it will be observed, that I have particularly noticed the generally local characters of the complaint, and the dependence it has for its support on the operation of locally irritating causes. Common Ringworm obtains *all* its formidable characters from these causes, and in the majority of cases arises, originally, either from neglect of cleanliness or infection.

The causes of *Porrigo favosa* are obviously of a different character: the latter has always a constitutional origin, and always requires the exhibition of remedies through the medium of the constitution.

The description of this affection given by a preceding author is as follows* :—

“ On the scalp the pustules are large, soft, whitish, itching, and slightly inflamed at the base. At first they are distinct, and partially distributed, as on the side of the head, or about the occiput. When broken, they discharge a thick viscid matter, which gradually concretes into irregular brown or yellowish semitransparent scabs. The ulcerations gradually extend, with a constant and copious discharge, by which the scabs are kept moist, and the hairs are matted together. Under these circumstances, Pediculi, which are bred in great numbers, produce an incessant irritation, and contribute to aggravate the disease, and to excite fresh pustules. The eruption finally covers the whole scalp, the pustules in some places remaining distinct, in others becoming confluent, so as to form irregular ulcerated blotches. From these, when the coverings or dressings of the head are removed, a sour rancid vapour is exhaled, which affects very disagreeably both the eyes and the organs of smell and taste in persons who examine or dress the patient.

* It will be observed, that there are many points in this description that will not apply to *all* cases, or in fact to any occurring in decent society.

“ In many cases there are among the pustules small red smooth tumors, which desquamate at the top, and very gradually proceed to suppuration, in the same manner as scrophulous tubercles do on the arms, &c. Sometimes, large abscesses form near the vertex, or at the occiput, probably originating in lymphatic glands situated there. As soon as they are broken, and begin to discharge freely, the pustular eruption and small ulcers on the other parts of the scalp disappear.

“ During the course of the *Porrigo favosa* affecting the scalp, the glands on the sides of the neck, and sometimes the parotids, harden and enlarge very gradually. They are at first like a series or chain of small hard knots, without discoloration of the skin, but some of them afterwards inflame and suppurate.

“ The *Porrigo favosa*, affecting the face, sometimes commences about the lips or upon the chin; but at other times extends thither from the scalp or from behind the ears. The pustules, in general, appear first at the corner of the mouth, without much tension or inflammation of the skin. They are set near together, in an irregular cluster, and contain a straw-coloured fluid; when broken, they become confluent, and discharge a clear, viscid matter, which afterwards concretes into a

yellowish scab. Other similar ulcerations appear, soon afterwards, at the opposite corner of the mouth, on the lips, or about the chin. These blotches being attended with an incessant itching, children cannot be prevented from rubbing or picking them; the consequence of which is, that their borders are kept sore, inflamed, and continually extending. The complaint has a most unpleasant aspect, when the ulcerations entirely surround the mouth, and are covered with large, elevated, irregular masses of scab, like honeycombs. There seems to be a considerable degree of acrimony in the matter discharged from beneath the scabs; for the part of the breast, which comes frequently in contact with the diseased chin, soon turns red, and exhibits an eruption of pustules, which terminate, as on the face, by a superficial ulceration. A similar appearance is produced on the arms of the nurse, who attends a child affected with the complaint."

In removing the scabs of this disease, whether existing on the head, or other part, we discover a reddened and inflamed surface, pouring out, with excessive rapidity, a viscous transparent fluid, which speedily dries and forms fresh scabs of various shades of colour, from a transparent yellow, to a dark brown.

An areola of inflammatory redness usually surrounds the part, as if the whole energies of the vessels of the diseased spot, and adjacent cutis, were called forth in keeping up the fluid secretion.

This state of matters will be constantly found, whenever the scabs are removed; in doing which, a small quantity of blood sometimes flows from the surface. The fluid secretion however, at no time, (except where constant irritation is kept up by picking the scabs, which children are accustomed to), appears like pus; for it is not opaque, nor does its chemical analysis, according to Alibert, afford similar results. The surface is not ulcerated, but merely abraded; the fluid, as I have before observed, being poured out from the open mouths of its vessels.

In the management of this disease there are few points of importance, beyond those which are comprehended in attention to the general health. The state of system under which it usually occurs, as a spontaneous disease, will be found more frequently to indicate the necessity for depletion and alteratives, rather than tonics, which have been recommended.

Applications which allay irritation and

diminish pain, are useful auxiliaries; and these together will be found adequate to the necessities of any case of the disease, not occurring on the scalp. On this latter part, however, obstacles intervene, requiring some alteration of treatment. Here the disease may be considered, as constantly under the influence of irritation from the hair, while the glutinous secretion lodging, and being retained upon it, prevents any application to the affected surface, and becomes a source of mechanical irritation, sufficiently powerful to counteract the effect which internal remedies may be supposed to have in subduing it. In protracted cases, such as those detailed by Alibert and others, where the mischief and torment of the disease are aggravated by myriads of vermin, and the accumulation of weeks and months of the secretions of the part; where neglect and filth have contributed from the beginning, all their influence to support the disease; the most material portion of our attention must be directed solely to the part. To remove such collections of filth, at the risk of some pain to the patient; the scabs in the first place, by continued soaking in warm water, with a plentiful use of soap, and the hair afterwards

by the razor, are steps of absolute necessity, without which, our time and subsequent exertions may be fruitless.

In such cases too, a considerable extent of ulceration is sometimes discovered, though not often sufficiently deep to affect the roots of the hair. But whether ulceration exists or not, the use of fomentations and poultices are necessary, to subdue the inflammatory action of the vessels of the part; and when this has been effected a little, attention to the general health is sometimes all that is necessary to the cure.

The length of time during which local applications may be necessary, however, depends very much on the period which the disease may have existed; for the action of the part acquires increased vigour with every week of its duration, and must frequently continue on the scalp a considerable length of time, after the causes originally producing it have ceased to exist: and even when much care is taken to remove the secretion as soon as formed, and allay irritation by soothing remedies, the effusion of viscous fluid on the part is now and then still kept up, apparently dependent on a morbidly relaxed state of its vessels.

An effectual application will be found in

a solution of caustic*, or sulphate of copper, in such a case : these fluids are to be applied with a camel's hair pencil, to the abraded surface two or three times a day, until the discharge ceases : they appear to act by constringing the relaxed vessels on the surface from which the discharge oozes, and in some cases, when their use appears necessary, their strength may be considerably increased with advantage.

The remarkable distribution of small tumours among the favous pustules, when the disease appears on the scalp, noticed in the preceding quotation, is not confined to the *P. favosa*, but sometimes occurs in the others, where much irritation is present ; and here they do not appear to arise in the milder cases, but only where the diseased surface is very considerable, and the irritation proportionately great. The contents of these tumours after suppuration, vary very much in character, being in some cases apparently healthy pus, and in others the curdy substance of scrofulous abscesses ; but never

* R. Argent. nitr. ℥j.

Aq. distill. ℥j. M.

R. Cupri Sulph. ℥j.

Aq. ferv. ℥ss. M.

resembling the viscous secretion of the disease. The little abscesses which they terminate in, usually heal without difficulty, and those which have not suppurated, disappear as the irritation of the part subsides.

Like Ringworm, the *P. favosa* spreads rapidly by infection through families of children, and it is not uncommon to see several of them inoculated from one child, around whose mouth one or two pustules may have appeared, and the contents have been applied to the lips and cheeks of its brothers and sisters, in kissing them. The breasts of the nurse are not unfrequently inoculated in the same manner. On these accounts it becomes a matter of prudence to separate the children from each other, when the disease once appears among them, or to prevent the infection of the healthy by more frequent ablutions than usual.

When a favous pustule has been produced by the application of matter in the foregoing manner, a speedy check to its course is often in our power. Its contents may be removed at once, and if the abrasion is of sufficient consequence to require, and the situation of it admits of such application, a small poultice may be applied. If this cannot be made use of, the frequently washing the part with warm

water will diminish the irritation, remove the secretion as fast as it is produced, and prevent the extension of the mischief.

PORRIGO LARVALIS.

THIS disease differs very little from the preceding in any of its important characteristics, and its causes may be pretty uniformly ascertained to be the same. The difference in the size of the pustule before its contents are discharged, is, I think, satisfactorily explained by the greater degree of delicacy of the skin in infancy, during which period it occurs; when, of course, the cuticle is sooner ruptured by any accumulation of fluid beneath it.

Notwithstanding the formidable accounts of its occasional obstinacy and duration given by some authors, it is well known only to require treatment of the most simple description; and in England, where cleanly habits distinguish almost the very lowest class of society, it should appear, that it cannot by possibility obtain the character of a formidable disease.

There seems to be a very near approach in similarity to Impetigo in the disease under consideration, as regards its external appear-

ances. In Impetigo, the pustules appear rapidly, and in clusters; go through their course, and are followed by scabby incrustations of a nearly similar kind; the same sensations, or pretty nearly so, accompany it, though it occurs chiefly in other parts of the body, as the legs, arms, hands, &c., and is generally considerably more difficult to remove. Dr. Bateman's opinion may be adduced in support of these remarks; but it does not appear that he considered the analogy so great between the favous species and this, from his proposition to denominate it Impetigo larvalis: the points of difference, however, between the three, seem to form merely a scale of gradation from the most active excitement, copious and extensive secretion of the vessels of the cutis, to a state assuming more of the characters of chronic inflammation.

An eruptive disease so commonly seen in infants within the first year, in the lower classes of society, and forming the only one of importance to which they are subject, excepting the exanthemata, appears scarcely to require elaborate description: the very accurate and scientific account of Dr. Willan, however, would sustain material injustice by any attempt at abbreviation. The strict cor-

rectness of his descriptions generally is not at all impaired by the transcript of Dr. Smith, in the work before us, to which we have so often alluded; and it is but justice to the latter to acknowledge, while we borrow his composition, that the most strict examination of the rise and progress of the disease in a variety of instances, has afforded abundant proofs that Dr. Willan could not have found a more correct and careful editor. In some instances, I have been able to add the result of a few remarks made by myself and others, to make the description complete: in the disease before us, there appears to be nothing left for observation to amend.

“ The *Porrigio Larvalis* * generally appears first on the forehead, in minute pustules, with a whitish point, set close together, and producing a redness and inequality of the surface, attended with considerable itching.

* It is by medical writers generally termed *Crusta Lactea*.

Dr. Armstrong calls it the *Tooth-rash*, because it appears so frequently at the time of teething in infants. “ Sometimes,” he says, “ it spreads all over them, and appears very much like the Itch. Sometimes it is confined to the head and face, putting on the form of large scabs or blotches, a good deal like the small-pox just after they are turned.”—*On the Diseases of Children*.

The pustules break in a few days, and discharge a clear, viscid humour, which gradually concretes into thin yellowish scabs. From beneath these a discharge of fluid takes place, from time to time, and forms additional layers of scab, of a brown or blackish colour, till the forehead is completely incrustated. The scabs are in some places thick and rounded, though not very compact; in others, thin or laminated, and loose at the edges. They do not separate at regular periods: if any of them be detached, the surface is presently covered by a new incrustation. The scab is alternately dry and humid. Sometimes, from a fresh eruption of the pustules, or from other circumstances, the discharge becomes on a sudden so profuse, that all the surface is laid bare, and remains for several days in a state of ulceration, emitting a thin, viscid, and acrimonious fluid from innumerable pores. Very young infants are most liable to be thus affected, and they suffer extremely from pain, itching, and irritation, when the complaint is extensive. On the cessation of the discharge, brown or blackish scabs gradually form again, and cover the ulcerated part. When the disease is about to terminate, the scab becomes dry, and sometimes whitish, and at length falls off, leaving a red, shining cuticle,

indented with deep lines, and very brittle,—hence it cracks and exfoliates, and is renewed perhaps three or four times before it acquires the usual colour and texture.

“ This complaint is not always confined to the forehead. In some cases, it appears first on the hairy scalp, the pustular eruption being preceded for some weeks by the Dandriff, or Pityriasis capitis *. In other cases, it may be first observed on the cheeks, or chin, on the temples, or about the ears. Wherever the disease commences, it usually extends, in the course of two or three months, to all the parts above mentioned, and likewise to the neck or breast, so that the whole face looks as if covered with a vizor †, the nose and eyelids alone being exempt from the dark incrustation. The fluid, which perpetually distils from among the scabs, diffuses a rank, unpleasant smell, and is very acrimonious, for it excoriates the adjoining parts where no eruption had previously appeared. The trunk of the body, and the extremities, are sometimes affected in this species of Porrigo. I have seen it on the back and loins, on the arms,

* On Cutaneous Diseases, p. 192.

† From this appearance, Dr. Willan denominated the disease, Porrigo larvalis.

thighs, and legs. An eruption of numerous, small Achores, is succeeded by layers of brown or blackish, laminated scabs, which nearly cover all the parts affected. After a few weeks, the scabs become dry and whitish; and at length fall off, discovering a red, smooth, and shining cuticle; but the disease often returns in the same places, and exhibits the same appearances as at first. Although the eruption may commence in any of the situations above mentioned, yet it seldom remains long without affecting either the hairy scalp, the forehead, or some part of the face, where it finally settles. All the symptoms are milder in children somewhat advanced, than in infants not a year old: there is less itching and irritation, and the discharge from the pustules is not so considerable; the scab or incrustation is also drier and less extensive. The complaint is chiefly confined to the forehead, temples, or cheeks; when it has disappeared from one of these places, a fresh eruption takes place in another, and sometimes the limbs are partially affected by it."

With regard to the remark of Dr. W. in the foregoing description, as to the occurrence after, or connexion of this affection with Pityriasis, it may be proper to observe, that the latter seems more frequently, when acting

as a cause of a disease more formidable than itself, to be followed by confirmed scalled head, or a state resembling the advanced stages of Ringworm. There is no question as to its frequent appearance in conjunction with Pityriasis, because its constitutional causes are as liable to exist where the latter has established itself, as where the scalp is free from disease; but it is only on the principle of local irritation that the former can act as a cause of any other affection, even on the scalp; and it can by no means produce a disease so evidently of constitutional origin as *P. larvalis*. The disposition to settle on the scalp, according to the language of Dr. W., which is manifested in most instances of this disease, is merely the consequence of the irritation of the hair on the diseased surface, and the difficulty it affords to the removal of the scabs and diseased secretions.

The most experienced authorities have remarked, that *P. larvalis* makes its appearance with the strongest features of activity, and disposition to rapidity of extension, in strong and healthy children: but children who have been most liberally fed, and who appear to have digestive organs equal to the management of every thing administered to them, come under this denomination; and there is

every reason to believe, that so long as this is really the case; so long as every portion of the food is converted into nourishment, and the action of the liver and bowels preserves its regularity; so long will the appearance of this eruption be to be regarded as desirable, and as eminently serviceable in the prevention of more formidable disease.

On the other hand, it has been seen after long duration in emaciated and sickly children, with tumid abdomen and enlarged glands in different parts of the body; and hence have arisen some doubts as to its original dependence on repletion. From the inquiries I have been enabled to make, however, I am not disposed to think this state of system capable of acting as a cause of the disease under any circumstances: mere inattention to cleanliness, in impoverished subjects, has never appeared capable of producing a cutaneous disease attended with any thing like that rapid pustulation and excessive discharge which characterise this. When occurring under the above condition of constitution, therefore, it will generally be found to have made its appearance long before the distressing symptoms described have been noticed. The itching, irritation, and restlessness belonging to it, together with the dis-

charge, will always be followed by a proportionate reduction of strength, and to a certain extent, consequently, it is capable of carrying into effect the grand and powerful remedial measure of nature, counter-irritation. The constitution of an over-fed infant is one of all others which renders the exercise of this principle most frequently necessary, and nature seems accordingly, on all occasions, to have provided for such necessity, by the institution of a disease like that under consideration. The common occurrence of glandular affections in conjunction with it should never be suffered to lead us to the incorrect notion of its analogy to diseases identified with original debility of constitution; for it is well known that irritation of the cutis, even of the slightest possible kind, is capable of effecting mischief in every gland in its neighbourhood, and the occasional enlargement of the mesenteric glands only occurs as a consequence of the continuance of the irritation of the disease, and the fever and debility induced by it.

There is ample reason for the serious consideration of the influence of this affection on the constitution of the infant, with relation to the well known disposition to determination to the head existing at this period of life: it is more than probable, that in this point of

view, its beneficial effects far exceed any thing which art can supply, and that death is averted by it in numberless instances.

With this view of the case, it will not be expected that notice should be taken of the vulgar ideas as to the mother's health, or the properties of the milk, to which nurses are accustomed to attribute mischiefs of great magnitude if suspicion can possibly be attached, as causes of P. larvalis. It would be as great a deviation from propriety and common sense to spend many words on the discussion of the virtues of the remedy of Strack, alluded to by Dr. Willan *. We may therefore dismiss these points, and together with them all attempts to estimate the value of that important symptom, the harbinger of recovery from the disease, so much dwelt on by the former, namely, the urine of the patient assuming the odour of that of the cat.

It has been already stated, that under proper management, the disease is not found to assume an obstinate or tedious character, and though it is described as recurring at short

* Half a drachm of the dried, or half an oz. of the fresh leaves of the viola tricolor, to be boiled in half a pint of cow's milk, and taken night and morning. This is certainly prescribing on a larger scale for infants than we are accustomed to!

intervals, in some instances for eighteen months together, the scabs dropping off, and the affected parts continuing to be covered with fresh crops of pustules; yet such a case is by no means of common occurrence, and when it happens, may most likely be attributed to the continuance of the original cause: or, as I think I have seen happen more than once in the treatment of *P. favosa*, the powers of the system may have been so reduced by the too frequent use of purgatives at first, as to prevent the healing process and the formation of new cuticle from being satisfactorily effected. Mothers and nurses are, moreover, with difficulty persuaded to employ that degree of assiduity in washing the part, from the pain which the infant suffers when it is touched, and hence the irritating secretions are allowed to accumulate and mat the hair together, till a degree of inflammation is produced, more than sufficient to excite fresh crops of pustules, and thus renew the mischief.

In one of the instances to which I have alluded of protracted *P. favosa*, from the too frequent exhibition of powerful purgatives, the subject, a young female, in whom the disease appeared about the mouth and face, had inoculated her sisters on the same parts, when this plan was instituted, and carried

on for some time in conjunction with low living, without effecting the removal of the disease. On the contrary, the abraded surface, when the scab had separated, exhibited great languor of circulation, and the strength was much impaired. This state of things continued a considerable length of time, and was only removed eventually by tonics, sea bathing, and a liberal allowance of animal food.

It has been considered an extraordinary circumstance, that even in the worst cases of *P. larvalis*, where the disease has extended over the whole scalp and face, no marks or seams of the skin should remain on the part after recovery; an attentive observation of the pathology of the disease, however, fully explains this, as the discharge is only poured out from the mouths of the irritated vessels on the surface, without the production of ulcerative absorption. When the cuticle is first elevated and broken by the pustule underneath, copious discharge takes place, not only on the particular point which the latter occupied, but the vessels surrounding it partake of the diseased action, and a more extensive surface of secretion is thus produced: were this not the case, the quantity of discharge would be considerably more limited.

The constitutional treatment should generally consist of mild aperients, exhibited in such doses as to keep the bowels gently acting, and effect a gradual reduction in the fulness of the habit.

Local applications should be such as are conformable to the obvious indications of nature. Instead of powdery substances, or astringent ointments, poultices, if they can be applied, should be had recourse to, and preferred to all other applications: they relieve the irritation of the part by encouraging the discharge from the surface, and thus furthering the object of nature, the cure is consequently much more speedily, as well as more safely brought about.

In the 15th vol. of the Medical and Phys. Journal, a case is recorded by Dr. Orme, where a strong hereditary disposition to the disease existed in a family, and became so generally troublesome, as to lead to the application of blisters to the back of the neck, at the period when in the infant it was expected to make its appearance. The experiment appears to have succeeded, and it may not be a bad practice, perhaps, in any case when the disease has established itself, and assumes an obstinate character.

CHAPTER VIII.

On the Papular Eruptions of Infants and Adults, denominated Strophulus, Lichen, &c.

1. STROPHULUS.

The above designation is applied to the eruption of pimples occurring in infants from birth, up to, and during the period of dentition. The trifling variations in character which it occasionally exhibits, have led to a division into five species: an attentive perusal, however, of the grounds of such distinction, and some observation of the affection, enable me to see little reason for observing it in the present discussion; while, on the other hand, attention to the important object in view of simplifying the subject by abolishing unnecessary distinctions and multiplicity of terms, requires their consideration under one head.

Dr. Willan does not seem to have been entirely aware of the great influence of variation in the degree of original irritability of skin in modifying the complexion of cutaneous diseases, or it is to be presumed, that, in the consideration of the subject before us, he would have preferred following this plan

in treating of them. It does not require much attention to perceive that the different *species* of Strophulus, unattended by constitutional affection, depend on this circumstance, or what would still less justify artificial distinction on the degree of local stimulus applied to the skin. The constitutional exciting cause is, of course, pretty nearly the same in all cases where the affection, as in its severer forms, has such an origin; but there is every reason to think that the skins of infants are frequently covered with pimples from the mere operation of local stimulus, either in the form of rough clothing, or by exposure to undue degrees of heat, without the slightest derangement of internal organs.

It is by no means a common thing to see the skins of young infants free from clusters of red pimples resembling what is represented under the designation of *S. intertinctus* and *S. confertus*; and that such affections should take on an active character under bad management, or disordered stomach and bowels, is not a matter of surprise. Inattention to cleanliness seems to be also a grand cause of such aggravation in numerous instances, and, indeed, there is reason to believe that where this is attended to, and the state of the bowels, and quantity and quality of the food carefully adapted to

the age of the child, this affection rarely requires the notice of the medical attendant.

With reference to the probable origin of the majority of these cases previous to the period of dentition, and to their connexion with local causes, it may be observed, that the habits of nurses are such as lead them almost constantly to the exposure of parts of the body of the child to the heat of the fire in their frequent changes of linen, or at other periods, while the fear of exposure to cold leads them to suffer the skin to remain too constantly in contact with flannel; and from what we often see of the inability even of adults to bear either one or the other of these without a great deal of itching and irritation, we are fully warranted in supposing that the delicate skin of the infant must often suffer very considerably. In a climate like this, it will, perhaps, be always considered the safest plan to avoid exposure to cold too suddenly; but there is ample reason observed by practical men to suppose the opposite extreme frequently run into to the prejudice of the infant's health.

Any thing which leads to irregular determination of blood to the skin would be expected to produce this affection in the infant, and it seems, indeed, to consist of a condition of the part very much resembling that attending what has been heretofore

termed miliary fever. The appearance of the pimples of Strophulus in infants about the neck and shoulders only, being confined to these parts, is, I think, often the simple consequence of the irritation of flannel; and it has, in repeated instances, disappeared as soon as the use of this kind of clothing has been forbidden.

In dividing the papular eruption of infants into so many species, and instituting such nice distinctions, it would appear that the difficulties to the inquirer in the study of these affections are materially increased, while the good which can, under any circumstances, arise from it, is exceedingly doubtful. The information at present diffused, as regards these subjects, renders the first circumstance seriously objectionable. The expense merely of Dr. Willan's work is calculated to prevent that extent of circulation requisite to enable every one to profit by his observations; and it is too much, where such expense has been incurred, to find the subject encumbered with avoidable difficulties of the kind alluded to.

Instead, therefore, of adopting his plan of description, I should be inclined to substitute the following, as being more simple and equally well calculated to convey clear ideas of the characters of the complaint.

“Eruptions of pimples occurring during

infancy, generally making their appearance first on parts most exposed, as the face, neck, and shoulders, hands, arms, &c. but occasionally on other parts (*P. intertinctus*). When the pimples wear a florid red appearance, the term red gum is familiarly applied: if showing a minor degree of irritation and a paler hue, it receives a corresponding designation, and is termed white gum (*S. albidus*). The affection, in its most common and simple form, consists of a few pimples irregularly distributed, now and then mixed with diffused patches of redness.

If circumstances favouring determination to the skin exist in an extraordinary degree, these patches are very numerous, and the pimples proportionately enlarged, the latter being found now and then to be partly made up of effused serum, forming a minute vesicle, which soon disappears. When, to the common determination to the skin in the infant is added the general feverish excitement attendant on dentition, this affection assumes a more aggravated form (*S. confertus*), and occurs more extensively in different parts of the body. The pimples in this case appear in patches, accompanied by considerable redness of the skin, are harder, and exhibiting marks of more active inflammation. Under

circumstances of high derangement of the secretions, and where the child has been improperly fed, it is stated to be sometimes attended with great itching, pain, and excoriation, and in this condition approaches on the lower parts of the body to the intertrigo of infants, or that abrasion and irritation of the cutis on the thighs and nates produced by the stimulus of the urine. Neglect in not frequently removing the napkins, or re-applying them after drying, saturated with the urinary salts, may be, however, capable of bringing about both the states described.

The occurrence of fever in conjunction with this eruption on a more extensive scale has led to another distinction, termed *S. volaticus*. Dr. W. denies that this combination is an unusual occurrence, and there appears ample reason for the opinion, that the fever is accidental, and brought about by causes of a temporary nature; and is therefore liable to occur wherever bad management prevails. The increased violence and extent of the cutaneous affection seems dependent on the latter, and is an effect analogous to that of the irritation of teething in the milder cases before noticed.

That the cutaneous affections of infants assuming the form of pimples should be so com-

mon is explained by the greater degree of vascularity of the cutis, and superior delicacy of the cuticle. In the formation of a pimple, an unusual degree of activity in the vessels of the spot is necessary, and this condition is one which the vascularity in question is peculiarly calculated to supply. Turgescence to a certain extent seems likewise an absolute requisite, and such turgescence is not at all impeded by the cuticle covering the spot, which readily yields to the impulse of the circulation, and a minute effusion of lymph takes place under it. This I consider to be the correct idea of the formation of a pimple; it is produced by a minute escape of lymph from a distended vessel, and not by an enlargement of an original part of the cutis, or, in other words, of a papilla, as hitherto supposed.

The above peculiarities of the infant's skin may therefore be said to constitute the predisposing cause, though it explains by itself the production of the more simple forms, while a course of management producing fullness of habit, or even what may be termed good health, rough and warm clothing, or any circumstances quickening the circulation and promoting determination to the skin, may be considered among those which excite it.

Enough may be collected from what has

been said as to the most proper plans of treatment. In a constitutional point of view, little seems requisite beyond a modification of diet and clothing, and occasional aperients; but the influence of the warm or vapour bath in all cases where the eruption gives uneasiness, is both locally and constitutionally productive of the most decided advantage. In aggravated cases accompanied by febrile symptoms, Dr. Willan recommends an emetic to be given, followed by a mild aperient, after which the decoction of bark is found useful.

The accounts of the imminent peril of checking or repelling eruptions of the kind under consideration, given by different authors, require to be received with some degree of caution. The idea as to their salutary influence on the constitution has been founded chiefly on the observation of their most frequent occurrence when the child enjoys good health: but from what has been remarked, it should appear, that this is a consequence rather than a cause of such a state, and perhaps the same relation may exist between its disappearance and the internal mischiefs now and then attending such disappearance; as the determination of blood to internal organs, in such cases, must necessarily deprive the vessels of the skin of every thing like turgescence.

2. LICHEN.

Eruptions assuming the above form in adults are usually ushered in by slight febrile symptoms, particularly when extensively diffused over different parts of the body. They occur under similar circumstances with those of infants, the consideration of which occupy the foregoing pages, namely, where powerful causes of determination to the skin occur, and remain for some time in operation. Hence they make their appearance as the hot weather commences, and are followed by great aggravation, if the circulation is hurried, and perspiration brought on by exertion.

Dr. Willan defines this affection "an extensive eruption of papulæ affecting adults, connected with internal disorder, usually terminating in scurf; recurrent; not contagious:" the more common forms, however, are not uniformly dependent on internal disorder, or followed by fever; on the contrary, they seem to appear not unfrequently very suddenly under exertion and perspiration with every symptom of apparent good health, and disappear in the course of a short time, together with the itching and tingling belonging to them.

The analogy between this affection and

Strophulus is exceedingly intimate, as is proved by the similarity in the most important of their features, and there is as little absolute necessity for its division into so many different species as in the latter. Hence the same mode of description may be resorted to with propriety.

Like *Strophulus*, the milder cases of this affection may be considered indicative of pretty good general health, though it is stated now and then to occur under states of great constitutional debility, when the pimples wear an appearance in colour, not much unlike *petechiæ*.

The description of lichen most conformable to necessary precision, without partaking of the complexity of Dr. Willan's arrangement, should be as follows :

An eruption of pimples occurring generally first in some part of the upper half of the body, as the face, neck, arms, &c. at seasons of the year when the circulation begins to be determined with unusual force to the surface of the body, as in the spring, and the approach of summer. The extent of the eruption varies considerably, according to the degree of exposure to heat and violence of exercise or labour to which the patient is accustomed, being in some cases partially diffused, and merely

attended with pretty severe tingling and itching; while in others, the eruption extends over almost every part of the body, and is accompanied by symptoms of general irritation and fever (L. Simplex). The pimples are larger, paler, and showing appearances of less activity of inflammation in situations which are exposed, than in others protected by the clothing; and when they occur on parts covered by the finer kind of hair, as on the chest, arms, legs, &c., they are often found to have one or more of such hairs growing from their centre (Lichen pilaris); the general disposition to irritability of skin appearing to be aggravated at the point where the hair penetrates it. When the pimples are so situated, and frequent friction is resorted to, to allay the itching and tingling, they appear to be speedily much increased in magnitude, and not unfrequently to pour out a bloody fluid round the roots of the hair. Now and then, from causes not clearly ascertained, the eruption, instead of being diffused, is limited to circumscribed patches, and hence the term *circumscriptus* has been employed to give this appearance its place as a species.

When any accidental cause of disorder of the digestive organs or exposure to cold has taken place, the eruption is of a more

aggravated kind, and its appearance is accompanied by so much derangement of system, as to give it the character of an exanthematous fever. "The papulæ are distributed in great numbers, without any certain order, chiefly on the arms, the upper part of the breast, neck, face, back, and sides of the abdomen; they have a high red colour, and are surrounded by extensive inflammation, or redness of the skin, attended with itching, heat, and painful tingling. When the patient becomes warm in bed, the redness increases; and there is a strong sensation of burning and smarting for an hour or more, as if the parts had been severely scalded. The same effect is produced at any time by washing, especially if soap be used; also by violent exercise, or by drinking wine. In the morning, the papulæ subside, the inflammation in a great measure disappears, and no uneasiness is felt till after dinner, unless it be excited by the above-mentioned or by other similar causes. Some small vesicles, filled with a straw-coloured fluid, are occasionally intermixed with the papulæ. These arise dispersedly on the arms, about the roots of the hair, on the forehead or temples, and often on the fingers, but they soon dry, and exfoliate. By a long continuance, or by fre-

quent returns, of the heat and redness, the skin is at length altered in its texture, becoming harsh, thickened, chappy, and exquisitely painful on being rubbed or handled.

The duration of this complaint and the modes of its termination are very uncertain. It sometimes continues four or five weeks without any material change in its appearance; sometimes it has an earlier termination by slight exfoliations of the cuticle: but in most instances the eruption appears and disappears repeatedly before the disease is removed. It may also by improper applications be suddenly repelled from the surface of the body. This incident is always succeeded by violent disorder of the constitution. I have observed, in one or two cases, where it was occasioned by imprudent exposure to cold, that an acute disease ensued with great heat and thirst, and accelerated pulse, frequent vomiting, pain in the bowels, head-ache, and delirium. After these symptoms had continued ten days, or somewhat longer, the patients recovered, though the eruption did not return. The uneasy sensation of itching and tingling at the commencement of the disorder leads many persons to rub the affected parts too harshly, and thereby to produce fissures, or excoriations, with a con-

siderable discharge of watery fluid. At an advanced period of the eruption similar effects take place from the violence of the cutaneous inflammation, without external injury. The ulcerated surface cannot, in either case, be readily healed by medicinal applications*."

The whole of the species of Dr. Willan may, I think, be said to consist merely of difference in the degree of violence of the disease, and the latter is regulated either by the state of the digestive organs at the time, or by the share of irritability of skin of the patient: the common summer rash, a local affection entirely, taking place where nothing particular exists in these respects, while the more aggravated form, as described in the quotation above, occurs under the circumstances of previously disordered constitution.

The appearance of these eruptions is stated to be sometimes followed by relief to old standing and obstinate complaints: pains in the stomach, in delicate females, are particularly specified among these, affording one among the many proofs which the study of cutaneous disease enables us to discover, of the value of counter-irritation in relieving

* Willan.

internal organs. When occurring in circumscribed patches after vaccination, Dr. Willan thinks it ought to be considered a proof that the system has been satisfactorily impregnated with the virus—an observation, if correct, perhaps of some value; but which experience, rather than reasoning, would be likely to enable us to confirm or reject.

In the treatment of these affections mild saline aperients are plainly indicated, but medicines which determine powerfully to the surface of the body aggravate the most troublesome symptoms; the itching and tingling being particularly increased by them during their operation, while but little alteration in the disease seems to be ultimately effected. A low diet and regimen, and avoiding exposure to the heat of the sun and violent exertion, are also very necessary. After the disappearance of the eruption, the state of system is said sometimes to require the use of tonics, but I doubt whether any case can occur where these would be called for, if purgatives of the kind mentioned are judiciously employed. It is evident that a gradual reduction of the strength and fulness of system effected in this way, would not be followed by debility, though violent cathartics may possibly produce it, and leave a state of the cutaneous affection resem-

bling that alluded to in the discussion of *Por-rigo larvalis*. Here, however, there is no abrasion of the surface, and the doubts as to the necessity of tonics receive additional strength from this circumstance; in short, mild aperients, and the occasional use of the warm bath, comprehend all that is generally necessary.

From some observations which I have lately had an opportunity of making on the sulphur vapour bath, I am induced to think it a most powerful instrument in the hands of a judicious medical man in the treatment of Lichen, though it should not be recommended till the bowels have been some time kept open, and the system, if the patient be of a full habit, has been a little reduced. The itching and tingling during its operation is rather severe, but it is followed by a much more tranquil state of the circulation in the cutaneous vessels, and the cure is altogether materially expedited by it.

The Lichen tropicus, or prickly heat of warm climates, is entitled, on some accounts, to a separate consideration from the foregoing. Dr. Willan has given an elaborate account of this affection from the pen of Dr. Winterbottom, and also quotations from Hillary, Bontius, Clark, Mosely, and others;

but the less tedious statement of Dr. Johnson, who evidently writes from experience of the disease in his own person, appears fully adequate to all our purposes. It is moreover entitled to the preference on the ground of peculiar accuracy; if the remembrance of my own feelings while a sufferer be at all correct. Persons a long time resident in India suffer considerably less than new comers, particularly if the latter are of a full habit, and disposed to indulgence in the luxuries of the table; and it has appeared to me to occur with peculiar violence in persons who, after a course of mercury in the treatment of some one or other of the diseases of the climate, are going on very rapidly recovering their health and strength.

“Among the primary effects of a hot climate (for it can hardly be called a disease) we may notice the prickly heat (*Lichen tropicus*) a very troublesome visitor, which few Europeans escape.

“This is one of the miseries of a tropical life, and a most unmanageable one it is. From mosquitoes, cock-roaches, ants, and the numerous other tribes of depredators on our *personal* property, we have some defence by night, and, in general, a respite by day; but this unwelcome guest assails us at all, and

particularly the most unseasonable hours. Many a time have I been forced to spring from table and abandon the repast, which I had scarcely touched, to writhe about in the open air, for a quarter of an hour : and often have I returned to the charge, with no better success, against my ignoble opponent ! The night affords no asylum. For some weeks after arriving in India, I seldom could obtain more than an hour's sleep at one time, before I was compelled to quit my couch, with no small precipitation, and if there were any water at hand, to sluice it over me, for the purpose of allaying the inexpressible irritation ! But this was productive of temporary relief only ; and what was worse, a more violent paroxysm frequently succeeded.

“The sensations arising from prickly heat are perfectly indescribable ; being compounded of pricking, itching, tingling, and many other feelings, for which I have no appropriate appellation.

“It is usually but not invariably accompanied by an eruption of vivid red pimples, not larger in general than a pin's head, which spread over the breast, arms, thighs, neck, and occasionally along the forehead, close to the hair. This eruption often disappears, in a great measure, when we are sitting quiet,

and the skin is cool; but no sooner do we use any exercise that brings out a perspiration, or swallow any warm, or stimulating fluid, such as tea, soup, or wine, than the pimples become elevated, so as to be distinctly seen, and but too sensibly felt.

“Prickly heat, being merely a symptom, not a cause of good health, its disappearance has been erroneously accused of producing much mischief; hence the early writers on tropical diseases, harping on the old string of “humoral pathology,” speak very seriously of the danger of *repelling*, and the advantage of “encouraging the eruption, by taking small warm liquors, as tea, coffee, wine whey, broth, and nourishing meats.”—*Hillary*.

“Even Dr. Mosely retails the puerile and exaggerated dangers of his predecessor. ‘There is great danger’ (says he) ‘in repelling the prickly heat; therefore cold bathing, and washing the body with cold water, at the time it is out, is always to be avoided.’ Every naval surgeon, however, who has been a few months in a hot climate, must have seen hundreds, if not thousands, plunging into the water, for days and weeks in succession, covered with prickly heat, yet without bad consequences ensuing.

“Indeed, I never saw it even repelled by the cold bath; and in my own case, as well as in many others, it rather seemed to aggravate the eruption and disagreeable sensations, especially during the glow which succeeded the immersion. It certainly disappears suddenly, sometimes on the *accession* of other diseases, but I never had reason to suppose, that its disappearance *occasioned* them. I have tried lime juice, hair powder, and a variety of external applications, with little or no benefit. In short, the only means, which I ever saw productive of any good effect in mitigating its violence, till the constitution got assimilated to the climate, were—light clothing—temperance in eating and drinking—avoiding all exercise in the heat of the day—open bowels—and last, not least, a determined resolution to resist with stoical apathy its first attacks. To sit quiet and unmoved under its pressure is undoubtedly no easy task, but if we can only muster up fortitude enough to bear with patience the first few minutes of the assault, without being roused into motion, the enemy, like the foiled tiger, will generally sneak off, and leave us victorious for the time.”

Lichen tropicus, however, as it is termed,

is by no means confined to the climates from which it derives its name, it being now and then seen here, though not in such a violent form. The pimples, in such cases, only exist a short time, making their appearance with the attendant itching and tingling when great exertion has brought on perspiration, and disappearing soon after the body becomes cool. Dancing seems to be the species of exercise most likely to bring it on, and it is generally more violent when the bowels are in a constipated state.

3. PRURIGO.

THE resemblance between Prurigo and some cases of lichen renders it advisable to speak of the former here, although it perhaps deserves to be considered in the majority of cases, rather as constituted of action of a chronic than active character; and as coming with more propriety under the head of the next section, on account of its frequent origin in local irritation from inattention to cleanliness.

The term employed to designate this affection is derived from its chief distinguishing feature; namely, the violent itching of the papulæ: and it is in many cases accompanied

with such a striking similarity of phenomena to simple lichen, as to justify some doubts whether any real difference exists. It is, like the latter, most troublesome in the spring, and at the commencement of summer, and is similarly aggravated by circumstances which have a temporary effect in inducing violent determination to the surface. In the milder cases, and where it exists only partially, the itching is not constant, but varies according to circumstances; still, however, preserving the disposition to become aggravated by exposure to heat. The pimples are described by Dr. Willan to be of a pale hue, but this is by no means the case when the itching is not present. When the latter is troublesome, considerable redness and heat of the skin surrounding the pimples is excited by the friction; and it is under these circumstances that the pimples lose their florid colour, appearing to be deprived of their usual supply of blood by the irritation and increased demand of the skin surrounding them. Pimples, however, are by no means necessary to form the disease called Prurigo, according to the general acceptation of the term; mere itching only existing in the greater number of cases coming under the notice of the medical practitioner. Like the majority of

other cutaneous diseases attended with itching, this sensation is much increased by exposure to heat or irritation, whether produced by exertion or by warm clothing; and hence in Prurigo it is most troublesome when the patient is warm in bed, and when he has been induced to resort to friction to relieve a trifling degree of it. Forbearance is a grand point in all such cases, and should be suggested to the patient as a part of the management of his disease.

By far the greater number of cases of this affection which come under the notice of the medical practitioner are limited in extent, and confined to particular situations; the most troublesome being those where the generative organs and their neighbourhood are affected; and it seems that neglect of frequent ablutions of these parts is often instrumental in producing it. When occurring in other situations, some deficiency on these points is usually discoverable, and it has appeared to me a circumstance of considerable weight in determining the question, as to the effect of lodgement of the secretions on the skin in producing it, that in persons usually attentive to these matters, where ablu-
tion can be easily applied, the affection is

least troublesome, while between the shoulders and on the back, where some difficulty occurs in the use of the towel, the itching is very great, and the pimples are numerous.

A more than usual degree of irritability of skin seems to be peculiarly favourable to Prurigo whether occurring extensively, or confined to the parts mentioned, and it is generally most severe in young people enjoying pretty good health.

Cleanliness and the warm bath are the most important remedial measures to be had recourse to in the treatment of Prurigo, as it occurs on the superior parts of the body in persons with unimpaired general health; but from the neglect of the affection at its first commencement in the neighbourhood of the scrotum and anus, a chronic morbid action of the vessels of these parts is sometimes permitted to be established, in which such measures do no good, and the patient's life is not unfrequently rendered miserable by the almost incessant itching and irritation attending it.

Alibert and Dr. Willan prescribe sulphur in this affection, to be exhibited internally; it is probable, however, that this medicine has no advantage over other aperients; in any case,

indeed, it is a matter of question whether medicines possessing, as this does, a power of producing determination to the skin, can be recommended on a proper principle, where the essential features of the disease to be cured are formed by the prevalence of this circumstance to a morbid extent, unless the energies of the circulation have been previously reduced by more active measures. This remark applies, of course, more particularly to the cases of young and otherwise healthy subjects, and does not admit of adoption as a guide in those cases assuming the chronic form, as in people more advanced in life.

Mr. Wilkinson, who has lately published a pamphlet on cutaneous diseases, has given a case of general Prurigo of a very obstinate character, which had resisted varied medical treatment for a considerable length of time, and was ultimately cured by a plan of treatment which he had previously found successful in squamous and other affections.

“I dipped (says he) some lint into aromatic vinegar undiluted, and touched most of the prominent papulæ, bleeding as they were from the laceration of the comb, (which had been substituted for the nails in scratching the part,) till the sense of smarting was as much as

the patient could bear, though at the height he declared it was preferable to the itching. I then sent him the following ointment :

R. Sulph. Sublim.
Picis. Liquidæ
Axung. Porcinæ lbss.
Terræ Cretos ꝑiv.
Hydrosulph. Ammon. 3ij.
M. ft. Unguentum.

I desired him to apply this ointment liberally over the whole extent of the eruption, to renew it every day, and wash it off every other day ; I gave him four grains of pil. plummer every night, and five drops of sol. arsenic three times a day. Wine, salt provision, shell-fish, and every stimulating article of food were forbidden.

“ During the second night after these applications he slept above four hours, and the itching was considerably abated during the day. In three days the acid was applied a second time, and afterwards a solution of the argenti nitras every third or fourth day, previously to the ointment.

“ In less than three weeks the patient was very comfortable, the eruption having nearly disappeared, and the itching being entirely removed. The pills and solution were continued for three weeks longer, during which

time a lotion of Hydr. oxym. in Sp. vini. rectific. was applied two or three times a day instead of the ointment."

In the work from which the foregoing quotation has been made, the author has laboured to prove, that the *secretions on the skin forming the diseases of this part are always essentially the same; that the varieties of the eruptions are produced solely by the conformation and constitution of the subject*, and that a vast majority of such diseases are easily cured by the same means. Were this really the case, what a mass of erudition, what laborious research and observation, what splendid talents and acquirements both in the medical and graphic arts have been misapplied or rendered worse than useless, by their tendency to inculcate doctrines so widely different from the truth! Fortunately, however, for the interests of the science and the community; fortunately for the opinions of living pathologists and the memory of deceased brethren; fortunately for the labours, and for due respect for the names, of Willan and Bateman; at least, something more is necessary than the erection of bold and extravagant theories and positive assertions, which accurate observation do not support, to convince us of the soundness of this doctrine.

The general application of the practice detailed above is stated by our author to be followed by almost uniformly successful results: common candour, however, obliges me to confess that in many cases, in which it is stated to be particularly applicable, it has, in the hands of others, proved worse than useless.

Of all other affections, the *Porrigio larvalis*, a disease made up of the most excessive irritation, accompanied by an immense discharge, and brought on uniformly by constitutional causes, is particularly specified for the application of the ointment mentioned alternately with diluted sulphuric acid, and solutions of lunar caustic! It is not consistent with the dignity of science, or with the views which every man ought to have in publishing his opinions, to indulge in severe criticism of the ideas of others; but as regards the matter under consideration, it would seem like remissness or inattention to the encouragement of the only legitimate and correct path of inquiry, to pass over the work alluded to, without particular notice. Practical observation has certainly largely contributed to the advancement of every branch of the healing art; and it ought, therefore, to be treated with respect in whatever form it may

appear: but when assertions are made, apparently in direct opposition to the first principles of the science, the attention of all who presume to think themselves capable of forming opinions worthy of publication, should be directed to them, so that those who read for information should be placed on their guard.

The pimples of Prurigo are stated to be observed in aggravated cases, now and then terminating in pustules resembling those of Scabies. Where an utter neglect of cleanliness in the habits of the patient at its commencement, and inattention to proper medicinal remedies exist, this occurrence is not improbable; it is, however, from what information I have been able to collect, extremely rare, even in the very lowest and dirtiest classes of society. It may be remarked, further, that in cases where Prurigo has been much aggravated by inattention to cleanliness, the itch is a disease to be often expected, as a thing of course, arising out of the habits of the patient; it is not, therefore, a matter of surprise that sulphur, as stated by Dr. Willan, should be the most effectual remedy.

The more formidable and distressing cases of this disease denominated P. Formicans and P. Senilis, do not appear to require a separate consideration, because there are no points of im-

portance in which they differ, except that hereafter to be described as consisting of semi-organized pimples mixed with others: the degree of itching attending, and the tingling or sensation of creeping insects, from which the former term is derived, being often referred particularly to the pimples of this description. The consequence of scratching violently any of these pimples, namely, the formation of a small blackish scab, is similar to what happens from this step in common cases, nor does there appear to be any ground for the opinion, that constitutional causes are more frequently concerned in producing them than the milder forms.

Dr. Willan expresses his conviction, that Prurigo, at its commencement, is not allied to itch; and from the common effect of determination to the skin being to produce itching, though in a minor degree, it should seem that no reasonable ground of suspicion of such connexion could have existed on this account: it is moreover now pretty well understood that itch is a disorder of the skin entirely dependent on the habits and operations of an insect to which Providence has allotted this part of the body for occupation and subsistence. It is not improbable, however, that many cases answering pretty correctly to the

description given of the worst cases of Prurigo may be those of genuine itch.

There is great variety in the plans of treatment recommended to be instituted for the relief of Prurigo. The state of constitution under which it occurs should always be borne in mind: if it be such as to admit of the use of purgatives to a liberal extent, the local affection will be much relieved by them. The milder cases, and for the most part those occurring in young people, are of this description; but alterative and sudorific remedies are rarely at first admissible in any instance. Bleeding has been followed by temporary good effects in some cases. The Harrogate bath has been also found a good remedial measure*, but that of sulphur vapour, to which I have before alluded, is entitled to the preference. Of the *modus operandi* of the latter, in this as well as some other diseases, I shall speak more fully hereafter.

* Artificially made as follows:

R̄. Sodæ Muriat. lbij.

Magnes. Sulph. ℥ij.

Potass. Sulphuret. lbj.

Aquæ Cong. xxxiv.

The salts must be first put into two-thirds of the water cold, and when dissolved, the sulphuret of potash added; then the remainder of the water boiling: to be used at 98.

Wilkinson.

The suspicion which has been entertained by Dr. Willan, that Prurigo is produced by a peculiar insect, does not appear to have been confirmed by subsequent observation. If it had been correct, indeed, it is probable that a considerably less equivocal effect would have followed the application of sulphur in the treatment of the disease.

The parts particularly noticed as the seats of violent itching sensations, usually unaccompanied by papular eruptions, are the verge of the anus, perineum, scrotum, prepuce, and glans penis in men, and pudendum in women; and in the latter it sometimes particularly affects the extremity of the urinary passage. The itching of the nose is another instance of this kind; its causes, namely, disordered states of the stomach and alimentary canal, are not unfrequently ascertained to give origin to the affection in the before-mentioned situations.

Attentive examination of the parts when the irritation is present (for it is in no instance, even of the most aggravated kind, incessant) always discovers much redness and scurfiness, as well as fluid secretion. In the neighbourhood of the anus particularly, there is very generally more moisture secreted than is consistent with health; and the folds of

the skin at the extremity of the rectum, in aggravated cases, pour out a glutinous fluid apparently possessing properties of a highly irritating nature. The perineum and posterior part of the scrotum partakes of the disordered action, till at length by the constant friction employed, the whole of these parts become abraded, and a copious discharge of fluid takes place, which for a time somewhat diminishes the itching, and substitutes for it a considerable degree of smarting and tenderness. More trifling degrees of Pruritus than these detailed are unquestionably produced sometimes by ascarides, but these are easily enough removed: the state described appears to be dependent on a certain derangement of the fluid secretion of the part, of the causes of which we at present possess but little information.

If no obvious cause exist in the constitution requiring alterative aperients or tonics, and local applications appear to hold out the only chance of advantage, they should be selected from among those known to possess the properties of correcting diseased secretions without acting merely as an astringent or sedative. It should be remembered that the more recent experience at present recorded justifies the opinion entertained by Dr. Lett-som, that the sudden suppression of affections

of this sort are deleterious to the constitution, and even capable of producing fatal effects. Applications of the latter kind, moreover, do not appear to do any permanent good in allaying the most prominent symptom.

Lime water, solutions or ointments of opium, tar ointment, &c. have been used with various success ; but ointments of any kind are inferior to lotions, inasmuch as their application favours the accumulation of the diseased and irritating secretion on the part. Lotions of prussic acid, particularly where abrasion has been produced by scratching, are very beneficial ; but their effects are in general only temporary.

The most uniformly beneficial system of management consists of a simple and unirritating diet and saline purgatives, with the local application of lotions of calomel and lime water. When the pruritus is concentrated about the verge of the anus, a pledget of lint dipped in the lotion should be introduced into the rectum, and retained there, while the adjacent parts are frequently wetted with the same. The folds of integument at the extremity of the rectum are more frequently the origin of the diseased secretion than is generally supposed, and if these can be kept by ablution free for a few days from irritating secretions, and the above applica-

tion be satisfactorily made, the perineum, scrotum, &c. soon return to a healthy state.

Now and then, however, in old standing cases, where the morbid action has been a long time established, much difficulty is experienced, in which event, if we expect to effect a permanent recovery, it must be by exciting a degree of active inflammation of the part which shall be adequate to the bringing about a total change in the action of its vessels. The best application with such a view is a pretty strong solution of the hydr. oxymur., and it may be persisted in till the skin is excited to a blush of deep red, with heat and smarting. Excoriation and a little vesication may be produced in this way, and the greatest inconvenience attending it is the confinement of the patient for a few days to his room.

The Prurigo preputii of Dr. Willan, as being merely the common consequence of suffering the secretion of the glandulæ odoriferæ to accumulate on the part and become irritating, may be passed over here, as well as his remarks on the means of destruction of the insects vulgarly termed "crabs *."

* The most expeditious and safe method of destroying these is by the free use of the following ointment.

R. Ung. hydr.

— sulph. simp. P. e. M.

Dr. W. has introduced some observations of Dr. Sims and others on the subject of symptomatic pruritus, or the itching of the labia, vagina, &c. sometimes attending hemorrhoids, scirrhus uteri, fungous excrescences, and other diseases in the neighbourhood, which would direct our attention to these points for inquiry whenever such parts are the seat of the irritation. Such symptom, however, is by no means so constant an attendant on these diseases as to be of much value in their diagnosis.

In a former page referring particularly to Lichen and Strophulus, a minute effusion of coagulable lymph was stated to be necessary to the formation of a pimple. When such effusion has taken place, the turgescence of the vessels concerned being diminished, the inflammatory action giving rise to it is also reduced, and the pimple is rapidly absorbed: the general disposition to determination to the skin still continuing, however, other vessels in the neighbourhood undergo the same process, and in this way successive crops of pustules continue to be produced. In infants this state of things is often allowed to be passed over without notice, till it assumes a character of material interference with the general health; when the injudicious wrapping with flannels, heated apartments, cram-

ming with food, and consequent disorder of bowels, or the increased irritation of teething, are discovered; and the disappearance of the affection is generally the result of measures directed to these points: but from the very gradual manner in which Prurigo comes on, from its being for a considerable time alleviated by friction, and consequently treated lightly or neglected, and from the continuance of the local or constitutional cause, the pimples here undergo a change, which amply explains the obstinacy which sometimes characterizes it. A degree of chronic inflammatory action in the vessels becomes established, and the pimples to a considerable extent, instead of being rapidly absorbed, undergo a kind of semi-organization, and become permanently the seat of tormenting itching, much increased by exposure to heat. Pimples of this kind contribute, as before observed, largely to make up the eruption of the aggravated cases described under the designation of P. Formicans and P. Senilis, and are only to be speedily removed by measures which destroy their organization. Pencilling with caustic appears to be the least painful method of effecting this object; but in the case of Mr. Wilkinson, quoted in a former page*, an-

* Page 205.

other plan is detailed of carrying the principle into effect.

It is highly probable that the terrific description given by M. Alibert * does not apply to any even of the most severe cases occurring in this country, and I do not recollect that any case has been recorded elsewhere of its existence from birth, of its extending through families, or being hereditary : unless any particular state of skin may be the sole cause indeed, one would suppose this improbable. With few exceptions, Mons. A. has found it occurring most violently in people either of sedentary occupations, or whose habits were marked by great inattention to cleanliness ; and the opinions of Dr. Willan and Dr. Lett-som, as to the danger in suddenly checking the disease, are confirmed by his experience ; its disappearance having been sometimes followed by delirium, and by marks of congestion in internal organs, and also by general anasarca in cases under his notice in the hospital of St. Louis. In attending to one or two of the milder cases of this disease, I have been led to suppose, and it is an idea which the observations of the authors quoted tend much to confirm, that the employment of the mind

* *Annuaire Medico Chirurgical.*

in an active manner is useful in warding off many of its attacks; in one instance, indeed, the patient himself was so convinced of its efficacy, as to suffer it to guide his conduct. He found that any conversation or reflection on the subject in which his mind was much engaged would be sure to bring on the attack, while unusually interesting business, or diversion, procured him a respite as long as they lasted.

CHAPTER IX.

On Urticaria.

THE classification of Dr. Willan places the varieties of nettle rash among the exanthemata, while the Eczema Mercuriale, a disease almost as frequently accompanied by febrile symptoms, and considerably more regular in its progress and decline, depending too, very frequently, like Urticaria, on causes affecting the skin, through the medium of the stomach, is placed with small-pox, &c. in the order vesiculæ. In this arrangement, one instance is presented out of many, which will occur to the reader, of the difficulty of classifying cuta-

neous diseases, so as to comprehend at once their constitutional causes and symptoms, and local characters. Even if our knowledge of the precise states of constitution under which they occur was complete, it is much to be questioned whether an arrangement could be formed upon it of superior utility to that of Dr. Willan, notwithstanding the objections which have been raised against it.

With a view of adhering to a general arrangement according to constitutional causes, I have placed Urticaria here. It is obviously allied in this point of view to the preceding affection, consisting chiefly of that species of determination to the skin, produced by sympathy with the stomach, or by local irritation, and may be also equally beneficial to the constitution.

The appearances of Urticaria are generally pretty well known. It is an affection so familiar as rarely to give occasion for the attendance of the medical practitioner, except accompanied by symptoms of constitutional derangement, and in by far the larger proportion of cases this does not happen.

It consists in its more common form of patches of inflammation, distributed here and there on different parts of the body; these patches are in some cases small in extent and

number; in others they are large, and each patch occupies a considerable portion of the skin. In the centre of the inflamed and reddened skin, which itself is not elevated, is situated a white irregularly formed spot, considerably raised above the surrounding cutis, which varies greatly in figure, being sometimes long and narrow, at others broad or round. It is perfectly destitute of colour, and severe sensations of itching, smarting, and tingling, are commonly referred to it. If the finger be drawn lightly over it, it presents much irregularity of surface to the touch, and its margin is also very irregular. The smaller inflamed patches not unfrequently exhibit this white protuberance in the form of small, distinct, circular tubercles, about the size of a spangle; but, generally, if more than two or three of these exist on a particular spot, they run into each other, and produce a lengthened stroke or wheal. Many, if not all, of the larger spots or wheals, are formed by the clustering together of the circular tubercles mentioned; and in proportion to their size, they are surrounded by a more or less vivid inflammatory redness, and a corresponding degree of increased heat, itching, and smarting, attend them.

Notwithstanding the very general origin

of Urticaria in temporary or accidental disorder of the system, it often occurs as an idiopathic affection, or, in other words, as a consequence merely of extraordinary irritability of skin, and hence some persons can produce it with slight friction on any part of their body, even where no suspicion of the slightest derangement of the function of any organ can be ascertained.

Though now and then occurring in debilitated constitutions, and in persons affected with visceral disease, a state of pretty good general health seems to be most favourable to its appearance. A full habit of body is one of the circumstances which act as an exciting cause, where the preternatural disposition to irritation in the skin alluded to is known to exist.

In the severer and more extensive cases suddenly produced by substances received into the stomach, the tumefaction is often greater about the neck and face than other parts, not unfrequently closing up the eyes, and obliterating every vestige of the natural features of the patient, a state frequently referred to the eating particular kinds of fish; but in more trifling cases, the substance or liquid to which it is attributed, is often such as others, and perhaps the patient himself, may have been

in the habit of partaking of on former occasions with impunity. So that it may depend on mere idiosyncrasy, or a state of stomach, or of the secretions, existing only temporarily. Much difficulty will exist in such cases in ascertaining to which of the articles forming the patient's diet the mischief is to be attributed; and there seems to be no more speedy method of arriving at this discovery than that suggested by Dr. Willan, of omitting first one and then another for a day or two, and watching the state of the complaint during the period such changes are being made.

The high degree of tumefaction above mentioned is not generally produced by any of the ordinary articles of food or drink, but usually follows the reception into the stomach of such as the patient is not constantly accustomed to. Almonds, mushrooms, cucumbers, honey, fruits of different kinds, opium, &c. have been particularly noticed among these; but the poisonous properties of fish, in a particular state, not well understood, is its most common cause. Mussels and lobsters seem to have been most frequently possessed of this property, and several fatal instances have occurred of their deleterious power. The general impression seems to be,

that the commencement of the putrefactive stage in the fish generates the poisonous properties in question ; and from my own observation in one or two cases, as well as the report of a medical friend, who has many years resided in the neighbourhood of Thames-street, I am inclined to consider this to be the fact. The lower classes of people, both men and women, attending the fish markets, are constantly affording cases of this kind, and, indeed, it is so common as to excite but little alarm. It is generally ascertained to have been produced in such cases by eating the refuse of the market, or the cheaper kind of shell-fish, particularly the mussel.

The poisonous properties in question are by no means confined to the fish of this climate : it is more common, as well as more violent, within the Tropics, both in the neighbourhood of land, and many degrees out at sea, and hence an important obstacle arises to the belief of its dependence on any particular species of sustenance which the fish may have obtained.

Dr. Burrows* has given a list of the dif-

* An account of two cases of death from eating mussels, with some general observations on fish poison, by G. M. Burrows, &c. &c.

ferent kinds of fish which are found to have been occasionally poisonous: the yellow-billed sprat, however, has been noticed as the only species which has produced immediate death within the tropics. From the result of the consultation of different authors who have been quoted by Dr. B., with regard to the supposed seat of the poison in particular parts of the fish, it appears that no foundation exists for the belief that any part of it can be eaten with safety, when another is tainted. Two cases of Urticaria, alluded to in the third vol. of the London Med. Repository, were supposed at first to be produced by merely eating the skin of the dried herring, but the patients were subsequently ascertained to have eaten the fish itself; and two inferences of some importance have very properly been drawn from these cases by Dr. B., namely, that as two persons, *not related*, ate of the fish, the effect was less likely to be the result of idiosyncrasy, and, that the process of pickling and drying does not destroy the poison. The gall bladder and liver, stomach and intestinal canal, have been supposed, with as little apparent reason, to be its exclusive seat; and the weight both of evidence and reasoning seems to be decidedly in favour of its

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distribution over every part of the fish, and of its not being dependent on disordered secretion of any particular organ.

The idea that impregnation of the circulation and solids of the animal with copper is consistent with life, is in itself exceedingly absurd, and yet among the various strange conjectures as to the cause of the poisonous properties of the fish, this is spoken of by scientific men in systematic works on the science of medicine, as the most rational explanation of the fact. It is true that copper, in the form of solution, received into the stomach, produces many of the symptoms attendant on fish poison; but, in such cases, the grand characteristic of the latter is absent; there is no urticaria, and if the stomach takes the alarm, and instantly rejects the obnoxious fluid (and it so constantly does so as to justify the use of the solution, under particular circumstances, as an emetic), no symptoms of disorder remain even for a single hour after it has been administered.

The evidence brought forward by Dr. B. in the publication above alluded to is in itself, I think, very conclusive against the theories of the origin of this affection in the secretions of any particular organ, or of the residence of the poison in any particular part of the fish.

There is, moreover, ample reason to doubt that even a disordered state of the health of the animal during life, (except as increasing the disposition to putrefaction after life is extinct) can have influence in inducing the mischief. The following facts may be reckoned among those which justify such doubts.

In February, 1813, the East-India ship *Lady Castlereagh* arrived at St. Helena, and was detained a considerable period waiting for convoy. During this time the crew were employed occasionally in catching mackerel, and a liberal supply was obtained for their daily consumption. For the space of several weeks, under the continuance of this practice, no instance of disorder occurred; but when the time for sailing approached, a large number of the men were induced to make attempts at pickling and drying for their homeward-bound passage. They succeeded in this plan very much to their satisfaction, but were induced to regale themselves with a dinner off the produce of their industry before the ship sailed, when no less than sixty were seriously affected. Vomiting, with extreme violence, general febrile symptoms, and urticaria about the face and neck, with immense tumefaction, occurring in every case. The officers and persons who only partook of the

fish when fresh caught were never affected. Hanging the fish up in the moonlight, in the drying process, was the only explanation occurring to the minds of the seamen of the cause of this accident!

The following symptoms are stated to have occurred in fatal cases from eating mussels:—sickness and vomiting of a great quantity of dark-coloured matter, and subsequently of a dark-green fluid; the urticaria covered the skin, and was attended by intolerable itching; great difficulty of breathing came on the second day; tormina, intense thirst and swelling of the abdomen and face followed, and the extremities gradually became cold and benumbed; the countenance became of an ashy paleness, and the pupils were extremely dilated; respiration difficult, insatiable thirst, quick, low, and tremulous pulse, and subsultus. In one instance death was preceded by severe convulsions.

The fish were obtained in these cases under circumstances unequivocally justifying the conjecture that the putrefactive stage had fully commenced*. The severer symptoms did not make their appearance till the day after the

* For further particulars of these cases, as well as for a very able enquiry into the subject of fish poison generally, I must refer the reader to Dr. Burrows's pamphlet.

fish had been eaten; but in ordinary cases vomiting soon comes on, and it is therefore not improbable, that death is averted in many instances, by the readiness with which the stomach rejects the poison.

“In ordinary cases, an hour or two after it has been received into the stomach, a sense of weight and oppression is referred to this organ, with nausea and vertigo, universal uneasiness, numbness of some part or parts of the body, constriction of the throat, a sense of heat about the head and eyes, quickly followed by urticaria and great tumefaction; immoderate thirst, and an eruption and itching on the skin in other parts, and vomiting, and now and then diarrhœa.”

The most direct means of relief consist of assisting nature in her efforts; first, by unloading the stomach with emetics, and afterwards, by the exhibition of brisk cathartics. If the symptoms are violent, the sulphate of copper, on account of its quickness of operation, seems best adapted to accomplish the first of these objects, and powdered jalap, for the same reason, should be selected for the second.

The lower class of people who work in and about Billingsgate are, as before observed, very subject to this accident; and a ge-

neral idea prevails among them, that large quantities of vinegar are calculated to check the violence of the symptoms; they are accordingly accustomed to drink it to a great extent as soon as they are made aware of the commencement of the disorder. I am not aware whether sugar has been tried as an antidote in any instance in this country, though from Dr. Burrows' account, it has been employed with success by one gentleman in numerous instances. Ether, in doses of twenty, thirty, or forty drops, given every half hour, is also mentioned as a remedy of great efficacy. In the slighter cases, produced by eating fish, if the disease is left to itself, the irritation and tumefaction begin to subside at the end of thirty-six or forty-eight hours, and it never reaches the duration of common febrile nettle-rash occurring from other causes.

The febrile nettle-rash is thus described by Dr. Willan.

"The symptoms preceding the eruption are pain and sickness at the stomach, headache, great languor or faintness, with a disposition to sleep, a sense of anxiety and increased quickness of the pulse, and a white fur on the tongue: in two days, or sometimes later, after these symptoms, the wheals appear,

with an efflorescence in patches of a vivid red, or sometimes nearly of a crimson colour. They are preceded by fits of coldness and shivering, and are attended with a most troublesome itching or tingling, which is greatly aggravated during the night, and which prevents rest for many hours. In order to avoid this inconvenience, I have known many persons sleep on a sofa without putting off their clothes, as their distress begins immediately on uncovering the body. The patches often coalesce, so as to produce a continuous redness: they appear on most parts of the surface, but they are diffused particularly on the shoulders, loins, nates, thighs, and about the knees. They extend likewise to the face; and there is sometimes a red circle round the palm of the hand, accompanied with a sensation of violent heat. They appear and disappear irregularly, first on one part, then on another, and they may be excited on any part of the skin by strong friction or scratching. During the day the efflorescence fades, and the wheals in general subside, but both of them return with a slight feeble paroxysm in the evening. The red patches of efflorescence are often elevated above the level of the adjoining cuticle, and form dense tumours, with a hard distinct border: the

interstices are of a dull white colour. When the patches are numerous, the face, or the limb chiefly covered with them, appears tense and considerably enlarged. At the latter end of the disorder, the eyelids are red and tumified, and there is often a swelling and inflammation on the sides of the feet. On the appearance of the eruption, the pain and sickness at stomach are in general relieved; but when it disappears, those symptoms return. The whole duration of the febrile nettle-rash is seven or eight days. As the eruption declines, the tongue becomes clear, the pulse returns to its usual state, and all internal disorder ceases: the efflorescence exhibits a light purple or pink colour, and then gradually disappears, being succeeded by slight exfoliations of the cuticle."

In the febrile nettle-rash, though the cutaneous affection is very severe, the constitutional condition should obtain the greatest share of the notice of the medical attendant. A more than usually severe attack of the febrile symptoms, in a constitution impaired by hard labour and intemperance, proved in one instance, recorded by Dr. Willan, very suddenly fatal, the abrupt disappearance of the eruption being followed by increase of the fever and delirium.

The sudden disappearance of the eruption of urticaria, where even slight symptoms of general irritation exist, may generally be considered an exceedingly unfavourable occurrence, particularly if the former has been very extensive, as there is no reason to doubt, that in such cases, it has a most important office to perform in the economy. Of many other cutaneous eruptions it may be safely considered, that the degree of danger of a sudden check to their progress depends somewhat on the existence or absence of disposition to mischief in any internal organ: such organ being that which evinces its latent disposition in this respect under such circumstances; but with regard to extensive eruptions of urticaria, from what I am able to collect, a considerable aggravation of the general febrile symptoms, with delirium, is the most common bad consequence, where their sudden suppression has been observed. It has been usual for medical writers, on the subject of suppressed eruptions, to direct measures for the restoration of the latter to the surface; and sudorifics and the warm bath comprehend what is usually thought advisable with this object in view. If, however, we are to consider eruptions of the kind under consideration as efforts of nature to avert evils of greater

magnitude; in other words, as means by which a dangerous determination of blood to internal organs is to be prevented, such measures are obviously inadequate, and too tedious in their operation for the purpose, because when the determination to the surface ceases, that to the organs alluded to may very generally be supposed to have begun: it should seem, therefore, that vesicatorics of such kind as are quickest in their operation, are entitled to a preference over other measures, as being capable of producing a state of determination to the skin approaching in similarity to that constituting the original disease of the part. As will be hereafter noticed in treating of Herpes, blisters may be rendered very useful in anticipating, as it were, the intentions of nature; and there does not appear any sound reason why they cannot be employed with propriety where she has so obviously made an effort to accomplish an object, as is exemplified in the institution of Urticaria. Where, therefore, this affection has been suddenly suppressed, one of the first objects ought to be to provide against harm by the application of blisters, and this principle may be advantageously acted on in all other points, which the circumstances of the case are composed of.

The state of the febrile symptoms, where

the eruption is unrepelled, will point out such measures as the case requires; but it should be always born in mind, that morbidly increased determination to the skin constitutes some of the most troublesome parts of the disease; and medicines, therefore, which increase this, such as sudorifics, ought not to be employed. The bowels should be copiously evacuated, and kept open by sulphate of magnesia exhibited at proper intervals, perhaps every four hours, alternately with the nitrate of potash, in doses of twenty or thirty grains. By this plan of treatment, the cutaneous irritation, as well as the febrile symptoms, will be kept under, and any cause of the affection connected with fulness of system gradually got rid of: the principles on which it is founded apply to almost every case of nettle-rash, whether accompanied by fever or not; but it is of essential importance that a corresponding diet and regimen should be observed at the same time.

Distension of the stomach, even if effected by the mildest and least irritating substances, or liquids, has appeared to be a cause of nettle-rash; and it is not improbable, that in delicate females, it has given occasion to the most obstinate and protracted cases of this affection, where the medical attendant has

been defeated in every attempt to find a remedy. I have lately had an opportunity of seeing a case of this kind in a young female answering to this description, who, as I had been informed, had consulted and followed the prescriptions of various medical men of reputation, for the last three years, without material change in the troublesome character of her disease. Every variation in diet had been had recourse to, and various plans of medical treatment had been tried: she had been at one time much reduced by aperients and low living, at another directed to live on animal food and take wine. A vegetable diet had been found most consistent with comfort, but had not been attended by a complete eradication of the disease. Inquiry into her habits, as regarded her appetite, and the frequency of her meals, led to the idea above mentioned, and she was directed to eat oftener, and limit the quantity at each meal to four or five ounces; to use the tepid bath twice a week, and have recourse to a saline aperient occasionally. Under this plan of management she has been secured from any further annoyance, though now and then admonished by a spot or two, after any infringement of its rules. One of the cases of an obstinate character, detailed by Dr. Willan, seems of a similar kind

to the foregoing, though it is possible that preternatural irritability of skin may have stood in the situation of a predisposing cause.

Cases now and then occur, where the white prominence remains, accompanied by itching, after the inflammatory redness of the cutis disappears; and these have given rise to the designation by Dr. Willan of *Urticaria pers-tans*. Another species (*U. conferta*), seems to have no peculiarity of importance,—“the eruption is full and extensively diffused, the wheals in many places coalesce, or are indented by close contact; they have very irregular forms; when they are singly considered, however, their size and elevation is, perhaps, less than in other species of *Urticaria*.” Moderate doses of the *aq. kali puri* in the former, and the application of *ung. calcis. hydr. alb.* in the latter, are stated to have been productive of benefit.

The *U. evanida*, as it has been termed by the last mentioned author, derives its distinguishing epithet from its temporary appearance and sudden removal; it is the most trifling form which nettle-rash assumes. The observations as to the treatment generally, contained in the few preceding

pages, comprehend every thing necessary on these variations.

The *U. subcutanea* and *tuberosa* appear to demand particular consideration on some points in their characters; but affections answering the descriptions given under these names, by Willan and Bateman, are extremely rare. "The *Urticaria subcutanea* is a sort of lurking nettle-rash that is marked by violent and almost constant tingling in the skin, which, from sudden changes of temperature, mental emotions, &c. is often increased to severe stinging pains, as if needles or sharp instruments were penetrating the surface. These sensations are at first limited to one spot in the leg or arm, but afterwards extend to other parts. It is only at distant intervals that an actual eruption of wheals takes place, which continue two or three days without producing any change in the other distressing symptoms. In persons so affected, the stomach is frequently attacked with pain, and the muscles of the leg are subject to cramps. It is relieved by repeated bathing in warm sea water, and gentle friction.

"The *Urticaria tuberosa* is marked by a rapid increase of some of the wheals to a large size, forming hard tuberosities, which seem to ex-

tend deeply, and occasion inability of motion and deep-seated pains. They appear chiefly on the limbs and loins, and are very hot and painful for some hours; they usually occur at night, and wholly subside before morning, leaving the patient weak, languid, and sore, as if he had been bruised or much fatigued. It seems to be excited by excesses in overheating by exercise, and the too free use of spirits, and is often tedious and obstinate.

“A regular light diet and a course of warm bathing are to be recommended, with occasional gentle laxatives, where the organs of digestion appear to be deranged.”

I am not aware that any thing has been added to the above observations on these singular forms of Urticaria, since the publication of Dr. Bateman. With respect to the first, it seems not improbable that the deep-seated pains described are the consequences of impeded determination to the surface; and that they would be much diminished by the occasional use of small blisters in different parts of the body.

CHAPTER X.

On Herpes.

THE import of the term Herpes is now generally understood to be an eruption of clusters of vesicles of various sizes, from the minutest distinguishable to the naked eye, to that of two or three barleycorns, situated upon a red and inflamed areola of skin. The term, as applied by the older writers, comprehended an extensive variety of other cutaneous affections very materially different; and Tilesius, whose observations have been inserted by Dr. Bateman in the 11th vol. of the Med. and Phys. Journal, speaks of the eruption as partly consisting of papulæ. The best authorities in England, where cutaneous diseases have been most successfully studied, however, limit it to a "vesicular disease, passing through a regular course of increase, maturation, and decline, and terminating in from ten to twelve or fourteen days. The vesicles arise in distinct but irregular clusters, which commonly appear in quick succession, and they are set near together on an inflamed

base, which extends a little way beyond the margin of each cluster. The eruption is preceded, when it is extensive, by considerable constitutional disorder, and accompanied by a sensation of heat and tingling, and sometimes by severe deep seated pain in the parts affected. The lymph of the vesicles, which is at first clear and colourless, becomes gradually milky and opaque, and ultimately concreted into scabs: but in some cases a copious discharge of it takes place, and tedious ulcerations ensue. The disorder is not contagious in any of its forms."

This vesicular disease occurs in different parts of the body, and is generally preceded by marks of some constitutional derangement. Slight febrile symptoms most commonly prevail for a few days before the appearance of the eruption, but they are often not of so much importance as to attract particular attention. The patients themselves, in some cases, do not feel sufficiently unwell to complain, nor is there much apparent disorder of any natural function. It has been often seen preceded, in delicate constitutions, by great thirst and a quickened pulse, which have prevailed for a day or two, notwithstanding the tongue may be clean and the bowels regular; but in some instances

pains referred particularly to the epigastrium, and other symptoms of disorder of the digestive organs, are complained of for some time before it makes its appearance. Languor and loss of appetite, rigors, head-ache, and sickness, if accompanied by heat and hurried circulation, are symptoms particularly connected with its severest forms. When the eruption appears, these symptoms are rarely in any respect materially mitigated, but continue generally so long as the inflammation extends, and fresh vesicles continue to be produced. The deep-seated pains specified above usually take the course of the eruption, continuing to be referred to the regions of the liver and stomach, when the latter extends in this direction round the waist, as in the common shingles, or to the scapulæ, spine, and os humeri, if situated on the shoulders, and extending down the arms.

The attention is usually attracted to the cutaneous affection by a sensation of heat and tingling in the part. On examination, a blush of bright redness is discovered, in the centre of which a few small vesicles, varying in size, appear to have been recently formed; near to it, a smaller patch of inflamed skin is discovered with a smaller number of vesicles, and, perhaps, a short distance from this an-

other, without a vesicle upon it, or with a minute resemblance of a pimple, which, in an hour or two, becomes a perfectly formed vesicle*, and is surrounded by others somewhat less advanced. If slight pressure by the finger or any accidental means be applied at this period, no great degree of tenderness is evinced, but a sensation of pricking is experienced, which is evidently the result of distension of the vesicle; but as the disease advances, the accidental contact of any substance is apt to produce a great deal of smarting pain. Within twenty-four hours, the vesicles first appearing attain the size of small pearls, and contain a clear transparent fluid, when two or three, situated in the thickest part of the cluster, run into each other, forming a larger vesicle of an irregular shape, the areola of inflamed skin being also increased.

The inflamed spots and clusters of vesicles described extend in an irregular line from the spot in which they first appear to distant parts; thus, if the first spot is discovered on the shoulder, or back of the neck, the successive eruptions and redness appear along the dorsum of the scapula and down the back of the arm every successive day for the first four

* It is probable that these incipient vesicles have given rise to the opinion of the existence of papulæ mixed with vesicles as forming this disease.

or five, disclosing fresh spots, till the disease reaches below the elbow, by which time the transparent vesicles, described as being first formed, become opaque, shrivel up, and terminate in a scab, the centre of which is in a few hours brown, and gradually adds to its extent the surrounding collapsed vesicles, which undergo the same change. The inflamed skin on which they are situated undergoes a corresponding alteration in appearance, and from a florid red becomes of a bluish colour, and loses all appearance of heat and irritation. In fourteen or fifteen days from the first appearance of the disease, the scabs fall off, leaving a tender discoloured state of the skin, which gradually disappears.

From this description, it will be obvious that the duration of the complaint depends entirely on the extent at which the eruption may arrive, and hence the answer to be given to the impatient inquiries of the sufferer should be particularly guarded till a day or two has elapsed without the appearance of a fresh crop of vesicles, for it is only under such circumstances that an opinion can be formed as to the cessation of the excessive smarting pain and tenderness belonging to it. If the eruption is completely effected in two days, and the constitution be strong and generally healthy, the space of time elapsing between the commencement of the vesicle and falling

off of the scab may not exceed fourteen days; but this is an instance of rare occurrence, the ordinary time elapsing between these periods being sometimes protracted to from twenty to twenty-five or twenty-seven days. When the constitution is much disordered, or improper applications have been used, it sometimes happens that little white sloughs occupy the sites of the vesicles, and that permanent indentations, or marks, are left in the skin after the healing process is complete.

The foregoing remarks are applied more particularly to that form of the disease familiarly termed Shingles, or Herpes zoster, the only peculiarity of importance belonging to which is its disposition to extend in a line from the spot in which it makes its first appearance, and from which its common designation is supposed to have been derived. The parts of the body on which the eruption takes this form are the back of the neck and shoulders, and the waist; but when the eruption appears indiscriminately in other situations, it has obtained a distinguishing appellation, "*Herpes phlyctænodes*."

In *Herpes phlyctænodes*, "the eruption has no certain seat; sometimes it commences on the cheeks or forehead, and sometimes on one of the extremities, and occasionally it begins on the neck and breast, and gradually extends

over the trunk to the lower extremities ; new clusters successively appearing for nearly the space of a week." When occurring so extensively, the vesicles do not attain the size common to more limited forms of the eruption ; they dry up, and the scabs fall off much quicker, though from fresh eruptions continuing to appear for a longer period, the duration of the disease is ultimately nearly the same. This variation in the course and character of the eruption is probably entirely accidental, and may be considered as affording another instance of the impolicy of increasing the number of distinctive appellations for mere shades of difference in cutaneous disease, where the correct pathology and best methods of treatment are precisely the same.

The disease under consideration, whether answering the description of *H. phlyctænodes* or *H. zoster*, is materially, as well at its commencement, as during every stage of its progress, unlike any other cutaneous affection ; nor does it either in its mildest or severest forms approximate to, or terminate in, any other which has been separated from it by the classification of Willan : its being confounded, therefore, with *Eczema*, *Impetigo*, or *Erysipelas*, as remarked by Dr. Bateman, could only have been the result of great inattention to its generic characters. The red

inflamed areola on which the vesicles appear, and the uniformly transparent character of the fluid which they contain, together with their regular progress towards exsiccation and ultimate falling off of the branny scales which they form, constitute sufficient grounds of distinction from all others.

Among the causes of Herpes, Tilesius mentions the suppression of hemorrhoidal or menstrual discharge; sudden change of the habits of the patient, more particularly from an active to a sedentary life, &c. He has also observed it most frequently among dirty people, and natives of warm climates, and in those whose diet consists largely of oil and fish. It occurs also, he states, very frequently in marshy neighbourhoods, in autumn. "Young people from the age of twelve to twenty-five are most frequently the subjects of the disease, although the aged are not altogether exempt from its attacks, and suffer severely from the pains which accompany it. Sometimes it has appeared critical, when supervening to bowel complaints, or to the chronic pains of the chest remaining after acute pulmonary affections. Like Erysipelas, it has been ascribed by some authors to acute paroxysms of anger *."

* Bateman.

From what has been observed on the subject of the symptoms which usually precede the eruption, little doubt can be entertained as to the dependance of Herpes on constitutional causes, though the nature or character of such causes are involved in the greatest obscurity. It is at one time supervening on general irritation of system, marked by quick pulse, thirst, and heat; and unaccompanied by determination to any particular organ; while at another, it is preceded by unequivocal indications of disorder of the stomach, liver, &c.; and it is proper to observe, that such symptoms, whatever they may have been, are not usually observed to continue after the eruption has gone through its course. Irregularities in the habits of the individual, we are justified in pronouncing to have little effect in inducing the disease, as it is not often seen in those whose conduct is even marked by extravagance in this respect; but a sudden change in the diet, where great uniformity as regards exercise and exertion is observed, is in a great number of cases ascertained to have occurred. Thus persons who have been long resident in warm climates, and who during a lengthened sea voyage have enjoyed uninterrupted health, are subject to severe attacks soon after their arrival.

In the absence of any data regarding the manner in which disorder of vital organs can produce cutaneous eruptions, we are fully warranted in supposing from the symptoms usually preceding Herpes, and commonly disappearing after this eruption has gone through its course, that mischiefs of some importance to such organs are averted by it; in short, that it exerts all the influence, and is entitled to the estimation of, a natural counter-irritant. In this character it has in two or three instances, in delicate females, within my own observation, checked the progress of symptoms which had given rise to great anxiety respecting the state of the thoracic viscera.

The treatment of Herpes comprehends but little. It would be as useless to attempt, (and perhaps nearly as dangerous to succeed in such attempt) to repress it, as the eruptions of small-pox, &c. The tingling, smarting, aching and burning heat belonging to it at its height, may however be considerably reduced, and the patient's feelings rendered considerably more comfortable by the free use of sedative applications. I believe it is a common practice among the generality of medical men to direct such applications; and as far as inquiry goes, I have not been able to ascertain that any mischief has arisen from their use.

Ancient opinions on such points are now submitted to the ordeal of unrestrained scientific reasoning, and are canvassed with that confidence which solid acquirements and observation have given to the majority of those who, at the present day, practise the medical profession; and consequently they are not permitted to restrain us from extending relief to our patients, merely from their antiquity.

Like the prickly heat, the eruption of Herpes can never be checked by any medicine or medicinal application; and those, therefore, which relieve the sufferings of the patient, ought not to be neglected. Solutions of ceruss. acet., or the liq. plumb. acet. dil. with the addition of alcohol, may be applied with advantage by means of wetted linen: they lessen the pains in question, *but never check the eruption in its course.* The vesicles ought not to be cut or rudely broken, such a proceeding generally rendering the separation of the scab considerably more tedious than it would otherwise be; but if care be taken to puncture each individual vesicle early, so as to allow of the free escape of the fluid, the pain is much diminished, and the irritation sooner subsides.

The constitutional treatment consists only of mild saline aperients and low living. If

sulphur possesses the properties attributed to it of equalizing the determination to the skin, it may be preferred to any other kind of medicine.

The decoction of dulcamara taken internally has been stated to be very efficacious in the cure of Herpes. The oil of the walnut kernel, the juice of the *rhus radicans* of Linneus, which is highly acrid and corrosive, as also the juice of the husk of the cashew nut of similar properties, are recommended by different writers as applications; they can never, however, be applied with propriety, except in those trifling spots unattended with much vesicular developement, constituting some of the cases termed *Herpes circinatus*; where substances possessing slightly caustic or powerfully astringent properties speedily remove the affection. It is on this principle that ink, solutions of sulphate of copper, &c. are found of considerable efficacy in removing the herpetie ringworm.

French writers entertain great dread of metastasis from Herpes: according to Alibert, it has been known to extend to the mucous membranes of the nose, throat, and larynx. He mentions several instances of formidable determination to particular organs, some of which evidently were connected with cutaneous affections of a very different kind from those under discussion. According to

him, these mischiefs are so common, and the symptoms supervening so distinctly marked, as to have enabled him to know at once that repulsion had taken place, though no external marks exist. It may be as well to observe with respect to this latter assertion, that the entire disappearance of the vesicles of genuine Herpes in a few hours, or in any way besides that of exsiccation and scabbing, is an event exceedingly improbable.

As regards the pathology of Herpes, it may be said to consist of effusion of serum from the minute extremities of vessels on the surface. It does not seem to be in any case dependent on impediments existing locally to the proper functions of the skin. The cuticle in a strong and healthy state is elevated by the fluid, and forms pretty strong parietes for each individual vesicle.

Looking at the disease as a counter-irritant, and satisfied, as we must be, of the important office it has to perform in the animal economy, it should seem that any interference with its progress would be injudicious; and if, as observed by Dr. Bateman, it was of so trifling a character as to allow, in all cases, the patients to proceed about their occupations, or to feel little or no personal inconvenience from it; perhaps no attempt to relieve could with propriety be made: but in a very large portion

of the cases denominated shingles, the pain, burning heat and tenderness, and great extent to which it often spreads, are, to say the least of them, inconveniences of a serious character, and such as it would be desirable to diminish, as far as may be consistent with safety, and obvious indications of nature.

It is fair to suppose that vesication is calculated to effect the purposes of nature in that state of system in which shingles occur better than any other artificial means. When, therefore, the disease is observed at its first commencement, and where only a few vesicles are formed, the course which it appears disposed to take being sufficiently manifest, a sound principle of reasoning would seem to justify the anticipation of the object of nature by the application of a strip of blistering plaster upon this part: in this way substituting the trifling and temporary inconvenience of a small blister, for a tedious and painful complaint.

Acting on this idea, I have in two or three instances applied small blisters to the uninflamed skin on the side of the eruption on which the latter seems disposed to extend, not only with the effect of checking such extension, but of producing a shrivelling of the vesicles already formed, and cutting short its progress altogether; avoiding at once its

tediousness, and all the pain attending it. The smarting and tenderness in the vesicles near the blister are soon diminished, nor has it in the cases alluded to appeared that the blistered surface healed less readily than under other circumstances. Care should, however, be taken not to apply the blister to the vesicles themselves, as it not only fails to raise the cuticle, but irritates the cutis, and is followed by a superficially sloughy surface of the latter on the site of each vesicle, forming so many little irritable indentations, which heal very tediously.

The grand distinguishing feature of Herpes, namely, the limited size of the vesicles, seems to depend on the cuticle being bound down to the cutis by the adhesive inflammation, during that state of the vessels of the skin, marked by great heat and redness, which precedes actual effusion of serum. Thus, when effusion takes place, it does not elevate the cuticle generally and extensively, as in erysipelas or pompholyx, but only on the precise spot occupied by the mouths of the vessels, from which the fluid escapes. Hence the pearl-like elevated form of the vesicle, and the obviously thinned and distended state of the cuticle forming its parietes.

The sense of pricking and pain on touching the apices is the consequence of the extreme

distension existing: the tender surface of the cutis is affected, and the adhesion round the margin of the vesicle disturbed by the slightest pressure.

That the above explanation of the peculiar form of the herpetic vesicle is correct, is, I think, proved by the effect of blisters alluded to. These applications do not fail to elevate the cuticle, and produce effusion on the surrounding uninflamed skin; but they never have this effect between the vesicles, or close to the margin of the cluster.

When the eruption is very slight and limited in extent, it is apt to assume a circular form, and hence has obtained the popular appellation of ringworm. Sometimes the vesicles are extremely minute, and then they generally dry up, and the cuticle falls off in a few days in the shape of small exfoliations, leaving a reddened scurfy areola. Spots of this kind occur in different parts of the body, which are seldom attended to, and speedily disappear by the use of any of the applications mentioned in a preceding page.

Dr. Bateman* has confounded this form of Herpes with a different affection of the skin, which assumes this circular figure, and

* Synopsis, page 234.

and which is distinctly communicable by contact. I have described the latter in a former page *, and have established its identity with common ringworm of the scalp: the pustular form which it assumes among the hair I have endeavoured to explain in the chapter on *Porrigo Scutulata*.

The whole of the varieties of Herpes are said to be more severe in warm than in cold climates: the remark applies with equal correctness to most cutaneous affections, and it is evident that the more free determination to the skin in hot weather affords an adequate explanation of this fact.

Herpes labialis and preputii, so designated by Willan and Bateman, from their situation, form two other species according to their arrangement. The first of these, a well known symptom attendant on catarrhal fevers, and appearing often towards their termination, requires but little attention. Though now and then troublesome for a day or two, and extending round the margin of the lips, it goes through its course in a week or ten days, the vesicles becoming first turbid and yellow, then drying up on the part, and ultimately

* Page 46.

falling off in the form of scabs. Sometimes it supervenes on mere disorder of the digestive organs unattended by fever, and frequently accompanies bilious fevers, dysentery, and other acute diseases. The posterior part of the fauces is sometimes affected when it appears suddenly after checked perspiration and cold, these parts having a few vesicles distributed upon them, surrounded by an erysipelatous inflammation.

The affection of the prepuce is described by Bateman to be so closely resembling chancre as to be "liable to a practical mistake of serious consequence to the patient." The mistake to which he alludes, however, is by no means an occurrence to be apprehended, where much professional knowledge exists on the part of the surgeon or physician. At the present day no man who knows what he ought to know of the science could possibly commit such a blunder.

"The attention of the patient is attracted to the part by an extreme itching, with some sense of heat; and on examining the prepuce, he finds one and sometimes two red patches, about the size of a silver penny, upon which are clustered five or six minute transparent vesicles, which, from their extreme tenuity, appear of the same red hue as the base on

which they stand. In the course of twenty-four or thirty hours the vesicles enlarge, and become of a milky hue, having lost their transparency; and on the third day they are coherent, and assume an almost pustular appearance. If the eruption is seated within that part of the prepuce which is extended over the glans, so that the vesicles are kept constantly covered and moist, like those that occur in the throat, they commonly break about the fourth or fifth day, and form a small ulceration on each patch. This discharges a little turbid serum, and has a white base, with a slight elevation at the edges, and by an inaccurate or inexperienced observer, it may be readily mistaken for chancre; more especially if any escharotic has been applied to it, which produces much irritation, as well as a deep seated hardness beneath the sore, such as is felt in true chancre. If no irritant be applied, the slight ulceration continues till the ninth or tenth day nearly unchanged, and then begins to heal, which process is completed by the twelfth, and the scabs fall off on the thirteenth or fourteenth day.

“When the patches occur, however, on the exterior portion of the prepuce, or where that part does not cover the glans, the duration of the eruption is shortened, and ulceration

does not actually take place. The contents of the vesicles begin to dry about the fifth day, and soon form a small hard acuminate scab, under which, if it be not rubbed off, the part is entirely healed by the ninth or tenth day, after which the little indented scab is loosened, and falls out."

Mr. Evans, to whom the profession is much indebted for his "Remarks on Ulcerations of the Genital Organs," observes, that this disease, except when occurring on the inner surface of the prepuce, rarely comes under the notice of the surgeon. When on the outer surface, in consequence of improper interference on the part of the patient, or from the effect of friction of the clothes, it is usually first seen in the form of an ulcer, with a yellow, or white and plain surface; the scab described in the foregoing extract having been partially or entirely removed.

I believe this is the state in which the affection usually comes under the notice of the surgeon, whether situated on the external or internal surface of the prepuce; and if the vesicles have been recently broken, the white specks on the cutis, marking the situation of their bases, are not found to be surrounded by thickening. Nor are they to be considered,

correctly speaking, as ulcerations, the only essential point in which they differ from simple abrasion, consisting of the whitened appearance of their surface. This whitened appearance of the surface of the sore may be readily pronounced to indicate a state of vessels of the part approaching in similarity to those on the surface of sloughy ill-conditioned sores, situated elsewhere, and while the inflammatory areola continues to surround it, it often rapidly extends, and obtains a similarly thickened and elevated edge. In this state of things, it is not surprising that the influence of a prevailing fashion to consider every kind of affection of the genital organs venereal, should have led to the mistake alluded to by Dr. Bateman. Since the publication of the observations of Mr. Abernethy, Mr. Evans, and others, however, it appears that not only this disease, but a great variety of others occurring on these parts, which have been also hitherto treated as venereal, are more readily cured by common sedative applications and alterative medicines than by mercurials.

The disease termed by Mr. Evans *venereola vulgaris*, is said by that gentleman to be most frequently confounded with Herpes on the prepuce; but he has given us, under the

head diagnosis *, ample means of distinguishing them. The herpetic disease is marked at its commencement by distinct vesicles ; and if not seen at this period, or till the vesicles have been broken, and the scab rubbed off, it consists of the superficial white specks described. If it has been any length of time in existence, and subject to irritating and improper applications, or, as is often the case, passed over with neglect, while its original cause remains in full operation, it assumes the character of an irritable superficial sore.

The *venerola vulgaris* is in every point of view a much more important disease ; it commences with the formation of a pustule, the contents of which undergo exsiccation on the spot, and form a scab of much greater solidity and dimensions than that which follows the vesicles of Herpes. This scab, instead of speedily separating, and leaving a superficial sore, adheres to the surface, and if its base be raised up and minutely examined, it seems to be attached by means of a stringy slough, approaching in similarity to that described as attaching the scab of *Rupia* in a preceding page. A pretty copious secretion of matter is also found under it, which concretes on the scab already formed, and gradually enlarges

* Remarks on ulcerations of the genital organs, p. 28.

it; and when the latter separates, a concave ulcer with a raised edge is disclosed, which subsequently heals by distinctly new granulations.

The cause of Herpes on the prepuce is generally understood to be disorder of the digestive organs, which may be either habitual, or brought about by temporary causes. Alteratives and aperients exhibited for a day or two, with the local applications of the liq. plumb. acet. dil. are generally found to comprehend every thing necessary to the cure. If, however, as now and then happens, the process of cicatrization is not completed by the time this plan has subdued the usual marks of irritation in and about the spot, the black lotion* may be substituted for the former with advantage.

The lymph of the vesicle taken from the prepuce, and inserted under the cuticle of the arm, in the part usually chosen for inoculation, has been in one instance seen by Mr. Evans followed by a vesicle of much larger dimensions than the original; "but in several later experiments the lymph has altogether failed in producing any effect;" it does not appear, therefore, that the causes of the af-

* R. Hydr. subm. ʒj.
Aq. calcis ʒvj. ft. lotio.

fection here are different from those producing it more generally on other parts of the body.

Mr. Evans's observations as to the causes of *H. preputialis* do not confirm the opinions of Mr. Pearson or Mr. Copeland; the former of whom supposed it to be connected with the previous use of mercury, and the latter * as sometimes the consequence of an irritable state of the urethra, or actual stricture of this part.

Herpetic vesicles sometimes occur on the edges of the eyelids, accompanied by a considerable degree of smarting and itching, followed in a day or two by inflammation of the conjunctiva; the vesicles being usually very small, and distributed among the hairs of the eyelids. Cases of this kind are often considered and treated as simple inflammation: on minute examination, however, the character of the complaint becomes sufficiently manifest.

The course and duration of the disease in this situation are similar to that of the smaller kinds of vesicles, situated on delicate membranes elsewhere, and do not generally require more attention. As a matter of precaution, it is advisable to employ mild aperients and sedative lotions.

* Bateman's Synopsis, page 240.

CHAPTER XI.

Of Aphtha, or Thrush.

IN justice to Dr. Bateman, it is proper to observe, that on the subject of the above affection but little has been recorded by ancient, or discovered by modern writers, which has not been duly noticed in his Synopsis. It is a disease, as occurring among infants, usually of trivial importance, and rarely capable, in its most aggravated forms, except where extreme debility has been induced, of producing any seriously bad effects.

Infants of all classes seem to be more or less subject to it; but it occurs much more frequently where deviations from the natural and proper manner of feeding have been observed, it being more common, as well as more violent, in children who have not been properly suckled, than in those who are supported entirely by the mother's milk. Even in the latter case, however, it sometimes occurs, and is then usually supposed to depend on some derangement of the health of the mother.

It is usually spoken of as a distinctly vesicular disease, as formed of "whitish or pearl-

coloured vesicles appearing on the tongue, lips, and interior surface of the mouth and throat," though its analogy, at its commencement, to the pimples of *Strophulus* has been suspected, and alluded to by one or two preceding writers. I have never been able to see this disease in the mouth of the infant in the form of distinct vesicles, and am inclined to think that the appearances which have given rise to this idea of its character, depend entirely on the peculiarities of the part, and that each white speck, constituting part of the disease, is produced as the pimples of *Strophulus* are, by a minute effusion of lymph under the delicate cuticle of the part. The peculiar delicacy of the latter in the infant, and the state of constant moisture and friction in which the tongue and other parts covered by the membranes of the mouth are kept in the infant, will readily explain why the substance of the pimple should be so soon disturbed and rubbed off, leaving that minute circle, or irregular and partly detached white crust of cuticle which distinguish the affection.

If the opinion of the vesicular character of Thrush were correct, the disease would appear to be somewhat analogous to Herpes; but as far as we are able to judge, there is by no means equal derangement of the system

acting as a cause, nor any thing like the same degree of pain and irritation attending it in its course; nor does it ever happen that herpetic vesicles on other parts of the body are co-existent with the disease under consideration, situated as before described. But on the other hand, the pimples of Strophulus are often, nay, generally, visible to some extent on the skin of other parts where the Thrush makes its appearance; which observation renders the identity, or, at least, close analogy of the two affections much more probable. As an argument, perhaps, it is of little importance to allege, that the cause of both, namely, improper feeding and derangement of the stomach, are the same, for, in truth, this assertion may be made of a large portion of the diseases forming the subjects of our notice.

The unimportant character of Thrush in the infant will excuse the following abbreviated description and notice of what has been recorded by different authors respecting its pathology and best methods of treatment.

The notice of the nurse is generally first attracted by apparent inability on the part of the infant to draw the milk in its usual satisfactory and contented manner, the effort being accompanied with more or less of pain and crying. The heat and irritation of the dis-

ease is soon communicated to the nipple of the mother, producing excoriation and excessive tenderness. On examining the infant's mouth, the lining of the cheeks, angles of the mouth, sides and dorsum of the tongue, have small white specks, more or less thickly distributed over them, and sometimes they are so closely set together, as to furnish a white incrustation down the centre of the tongue. The detached specks resemble, and are occasionally mistaken for minute portions of curd, and these commonly separate earlier than in parts where the disease is more thickly distributed, leaving a florid and rather unhealthy looking state of the part. If the original causes of the disease remain in operation, fresh crops of the minute specks are apt to occur, leading to much irritation and exhaustion, and sometimes considerable wasting of flesh.

Every thing which disorders the stomach and bowels, or reduces the strength of the system, is capable of producing Thrush. So that the habits and health of the nurse may be occasionally reasonably suspected, where no feeding by the hand is had recourse to, or where the latter has received an ordinary share of attention. An unhealthy atmosphere, want of cleanliness, and food in which a great quantity of sugar has been employed, and in

the preparation and exhibition of which little attention is paid to consistence or quantity, are often noticed as its causes.

The duration of this affection depends on the degree of disorder of the general health, stomach, and bowels of the infant. If this be such as to admit of easy correction, the local disease lasts but two or three days, and does not become extensive; but if no alteration is made in these respects, it may continue much longer, and become a powerful cause of additional debility by the irritation and pain, and interference with the exhibition of nourishment attending it. Children brought up by hand are most subject to its severer forms, and when these are sickly and delicate, inattention to their food is often productive of serious forms of the disease; but there is no doubt that restriction as to quantity or deterioration of the quality of the milk, is equally capable of bringing it on.

Delicate females sometimes have their infants suffer considerably by persisting in suckling them, though assisted by what is supposed an adequate quantity of spoon victuals; but as soon as all attempts at suckling are forbidden, and the latter is entirely depended on for the nourishment of the child, the disease disappears, and the general health rapidly improves.

The kind of medicine most likely to do good in the treatment of Thrush is that which is most applicable to the constitutional condition of the patient. Mild alteratives are, in the majority of cases, all which are found necessary; an open and regular state of the bowels being of the greatest importance.

As an application, borax and honey seem to have obtained the preference to all others, and it is generally the only thing had recourse to locally in the management of the disease. Preparations of soda, indeed, are generally useful as applications in subduing irritation of the membrane of the mouth and fauces, whether arising from excoriation or other causes.

An idea generally prevails among nurses, that the eruption of Thrush extends through the whole alimentary canal, and hence they are accustomed to look on any irritation or redness about the anus as a sign of the termination of the disease; it being under these circumstances supposed to have finished its travels. There seems to be no reason to suppose, however, that it extends beyond the mouth and fauces in ordinary instances; the irritation about the anus being much more satisfactorily explained by reference to the influence of diseased secretions.

An inconvenience of some importance is

often sustained by the mother or nurse in suckling infants, during the progress of the disease, from the excoriation of the nipple before alluded to. The cause of this excoriation is generally understood to be the application of the diseased secretion of the tongue and lips of the infant to the part. It is probable that such affection might be entirely prevented, if the existence of Thrush in the infant could be sufficiently soon discovered; as the simple application of a little warm water to the nipple, after each time that the child has been allowed to suck, would effectually dislodge the cause of the irritation.

The part of the nipple most frequently the seat of this disorder is its base: around which a ring of abraded and extremely tender cuticle is generally discovered, sometimes assuming the character of a deep fissure, somewhat resembling those of Psoriasis. Extreme tenderness and pain are usually complained of, and if the abraded surface be minutely examined, it is often found covered by coagulable lymph. From the pressure of the dress, or covering of the part when the affection has existed for a few days, and when a crack or fissure is produced, the abraded sides of such fissure are brought into contact, and are partly glued together in the course of a few hours; and in such case, the pain, when the child is again

applied, is extremely severe, the recently formed adhesion being forcibly torn through by its efforts in extending the nipple. This affection is so well understood to arise in the way described, as to render Dr. Bateman's advice in the treatment of Thrush, namely, to change the nurse, extremely difficult to be followed, even if an opportunity should occur of making such arrangement satisfactorily in other respects; and in the majority of cases, it will be found by far the better plan to wean the child at once. It will be obvious, that, even on the child's account, this plan ought to be preferred, because the effort of swallowing properly prepared spoon victuals would be much less painful to it than the attrition and muscular exertion of the affected parts in sucking. If suckling be continued also, it is impossible to have recourse to any applications likely to remove the pain and irritation of the affected nipple with safety, though the disease readily heals if a state of quietude of the part be enjoined, and applications of a sedative kind be had recourse to. Weak spirituous lotions, with a small quantity of ext. litharg. seem entitled to preference on some points; but the red precipitate ointment, very much diluted, is also used with much advantage.

The Aphtha Adulorum, as it has been termed by Dr. Bateman, is an essentially different disease from the foregoing, though perhaps attributable, in a great number of cases, to the same causes. It is a distinctly vesicular disease, usually appearing on some of the same parts as the Thrush of infants, the edges of the tongue and the fauces being its most common situations. If the vesicles are observed before the cuticle is ruptured, the fluid they contain is generally found more or less coloured with sanguineous discharge from the denuded cutis, greatly resembling that of the vesicles described in the chapters on Purpura, Pompholyx, &c.; but when they become broken, the collapsed cuticle exhibits a whitened appearance, and adheres to the affected surface, thus exhibiting some resemblance to Thrush. The diseased surface is exceedingly tender and irritable, and superficial sloughs, to which the cuticle becomes attached, are formed, which do not readily separate. A viscid, offensive discharge, which the patient has much difficulty in getting rid of, takes place, and seems to excite a great deal of nausea and vomiting, and further exhaustion of strength.

This affection is always found to have originated in low and debilitated states of sy-

stem. The depressing effects of previous severe fevers, and in the lower classes of lying-in women, tedious labours, deficient nourishment, close and unhealthy apartments, are its usual concomitants; it is, indeed, both as regards its etiology and pathology, nearly allied to Purpura and the vesicles of scurvy; being often in the class of persons mentioned, accompanied with the appearances of the latter diseases, such as petechiæ and blue-coloured vesications, on other parts of the body.

The constitutional condition of the patient always requires the utmost attention in this disease. The local affection being properly understood to indicate a state of alarming debility, tonics and stimulants will be always necessary; and if the febrile symptoms afford no objection to the removal of the patient into a purer atmosphere, this step will be attended with great advantage. It is exceedingly difficult in many cases to give, by any plan of treatment, that energy and tone to the constitution which is necessary to bring on a healthy state of the diseased spots, either on the tongue or other parts. Weeks will, in some cases, pass away under the diligent employment of the plan of treatment alluded to, without a beneficial change in such respects, and local applications seem to have

little or no effect. Under these circumstances, there does not seem to be sufficient energy of the constitution for the slightest natural attempt at reparation; and the white sloughy sore, found, perhaps, on the hands or feet, appears to undergo the process of exsiccation, neither going forwards to, nor receding farther from, the healthy state, and no appearance of fluid secretion upon it occurring till death takes place.

Dr. Bateman has applied the term Aphtha Anginosa to a disease of which he gives the following account. "A species of sore throat, which is not unfrequently observed during damp and cold autumnal seasons, especially in women and children. It is preceded by slight febrile symptoms, which seldom continue many days. On the second or third day, a roughness and soreness are perceived in the throat, which, on inspection, is found to be tumid, especially the tonsils, uvula, and lower part of the velum pendulum, and considerably inflamed, but of a purplish-red colour. The same colour extends along the sides of the tongue, which is covered in the middle with a thin white crust, through which the elongated and inflamed papillæ protrude their red points. Small whitish specks form on these parts, which usually remain distinct, and heal in a

few days, but occasionally coalesce, and produce patches of superficial ulceration. The complaint is sometimes continued three weeks or a month by successive appearances of the Aphthæ, but without any constitutional disturbance.

“ This disease appears to arise from the influence of cold and moisture, unwholesome diet, and acrid effluvia taken into the lungs. In the latter mode, it is produced in persons who attend on patients affected with confluent small-pox, scarletina, anginosa, or other malignant fevers.

“ Although there is no clear evidence of its propagation by contagion, it is frequently seen to attack several children in the same family, about the same time, or in very quick succession. There appears to be no danger in this affection, and medicine does not materially abbreviate its duration. A light diet, with diluent drinks, and gentle laxatives, where there is a disposition to inactivity in the bowels, constitute the only treatment required for its cure. Leeches and blisters seem to be rather detrimental than advantageous; and cinchona, with mineral acids, to be useless, until the decline of the disorder, when they contribute to restore the strength.”

CHAPTER XII.

Of the Furunculus, or Boil.

DR. BATEMAN has omitted the consideration of this disease of the cutis, on the ground of its occupation of a place in the works of surgical writers. Notwithstanding, however, the attention it has obtained from Richter, Richerand, Dr. Pearson, and others, there are some points to which the reader's attention may be directed, in a work like the present, with some prospect of advantage.

There are two species of boils, one of which involves the cutis and cellular tissue beneath to a great extent, forming a tumour, sometimes attaining the size of a pigeon's egg; the other confined to, and only involving in the suppurative process, the substance of the cutis.

The former of these makes its first appearance in the form of a painful, red, circumscribed tumour, excessively tender to the touch, and generally approaching to a conical form as regards that portion of it which is raised above the surrounding uninflamed skin. On the apex of the cone and centre of the tumour a little white speck or slough is generally observed, which is sometimes picked

off by the patient, with the hope of extricating the matter underneath, but which, under such circumstances, only discloses an excavation of a corresponding size. There is reason to suppose that matter is formed in boils of this kind in two or three days after the commencement of the disease; but from its being deeply imbedded in the cutis, it is prevented from making its way to the surface by the thickening of the superincumbent structure produced by the adhesive inflammation. The matter being confined in this manner, the ulcerative absorption extends downwards rather than upwards, and involves the parts beneath the cutis, forming a much more extensive collection of matter than naturally belongs to the disease, and concealing the circumstance of its cutaneous origin.

The second form is less painful, but equally tender to the touch, very small in extent, and does not involve the cellular tissue; it is strictly confined to the substance of the cutis, and is vulgarly termed the blind boil.

Mr. Fosbrooke * has given a very valuable, and, except in one point, very correct account of this form of boil, with useful observations on the best method of treatment. He says

* Ed. Med. and Sur. Journ. No. 66.

“the features of this little disease are a dark red lenticular swelling; the inflammation is intense and concentrated; and if these little tubercles undergo pressure in the early stage of suppurative inflammation, a transparent serum is effused, probably coagulable lymph. It is slow in maturation, and pus first appears in a minute yellow elevation in the centre, the surrounding space circumscribed by the inflammatory process still continuing in a slow state of that action, particularly hard and solid. The quantity of matter discharged is not very great, and, in most cases, where the inflammation is not very obvious on the surface, it appears to act so vigorously beneath, that the cellular membrane partakes of the disease, and comes away in a small eschar.” After the excavation formed by the slough is filled up, and the inflammation has subsided, it requires some time for the absorbents to remove the thickening of the part which has been produced; some languor of circulation usually remains also, marked by a blue appearance of the thickened part.

Mr. Fosbrooke thinks this disease allied to true carbuncle: perhaps the same remark may be made with great propriety of any form of boil, the character of the disease being really the same, and the difference consisting

only in extent. He does not advise "an early exoneration of the central fluid by the lancet; the knot of vessels which are throwing out an effusion in the early stage are merely irritated into increased action, and parts in such a state, according to the common laws of surgery, are not exactly likely to assume, if wounded, a healthy action."

Large doses of the diluted sulphuric acid seem to have been very efficacious in the hands of this gentleman. He commences with twenty minims, gradually increasing it to one, or even two drams twice a day, very largely diluted, and he describes the effect to be a deadening of the pain, and a gradual absorption of the swelling, without suppuration.

This form of boil does not terminate usually in the formation of any healthy pus, and if squeezed at any period, and the little white slough in the centre be extracted, the inflammation usually subsides. The slough in question does not, as Mr. F. supposes, involve any part below the substance of the cutis. The parts of the body in which it appears most numerous is the trunk, particularly on the abdomen, while the larger boil is most commonly seen on the arms, thighs, and nates.

From the tedious progress of this kind of the disease under consideration, and from the continued appearance of fresh inflamed tubercles as fast as the first, which have appeared, subside, the local surgical treatment is of but little importance, the most obvious indication being to correct the state of system which produces it. The communication of Mr. F. above stated, seems, therefore, to be of the greatest value. Should the practice he mentions be followed by uniformly similar results, much pain to the patient and trouble to the medical attendant will hereafter be saved. The free incision even into quarters of the tubercles, poultices, fomentations, leeches, and applications tending to disperse them, however diligently applied, have been usually found far less productive of advantage, than he has described the sulphuric acid to be.

Some constitutional affection is generally produced by the pain attending extensive formations of boils, and indeed the occurrence of a single boil of the first species is sometimes productive of much febrile irritation; such symptoms, however, do not in any case usher in the disease, and are therefore to be considered, whenever they occur, simply as its consequences, they usually rapidly dis-

appear as soon as a free opening is made, and the matter discharged.

The same causes produce the two species or forms described; indeed it will be seen that there are no pathological differences of importance between them, the circumstances on which the extension of the mischief downwards, and consequently the increased size of the former being, perhaps, merely accidental. Young people of full plethoric habits, and those enjoying good health, and what is termed good living, are most subject to them; and like other cutaneous diseases, they appear in their worst forms during the spring and summer quarters, when the determination to the skin is much increased.

The same principles of treatment also are generally applicable to both, except that as regards the smaller species, it is sometimes advisable not to wait for the tedious process of unhealthy suppuration, attempts at dispersion of the tubercle being now and then found effectual.

The degree of pain attending each tubercle fully justifies, and sometimes amply repays the trouble of applying a leech to its centre; but if the disease be extensive, this plan is hardly practicable to a sufficient extent. Laying open the substance of the tubercle with a lancet,

however freely done, does not appear to be speedily followed by ease, as in the other species, nor does the thickening and hardness much more rapidly subside than if the disease had been left to pursue its course.

With respect to the common boil, where the inflammation is more extensive and produces an enlarged tumour, but little good is to be obtained by any management but that which encourages suppuration. If it be cut into before the latter process has fully taken place, the cure seems to be rather retarded than expedited, and other boils are much more likely to occur in the neighbourhood. When suppuration has occurred, and the matter has found its way to the surface, and been freely discharged, a few days only are necessary to fill up the excavation, and restore soundness to the part.

If sulphuric acid be a medicine of such efficacy in the carbuncular furuncle, it will probably be found of some service in the constitutional treatment of this; but heretofore the treatment generally had recourse to has consisted of purgatives, and low living. The precise state of system, however, will always be found the best guide in the constitutional management of any local disease.

SECTION IV.

On diseases marked by chronic inflammation of the vessels secreting the cuticle, producing morbid growth of this structure; constitutional causes or influence uncertain.

CHAPTER XIII.

Of Lepra.

THE most important and incontrollable of the diseases coming under the above head for consideration, is Lepra.

The understanding in which the term is at present received, is that of a disease exhibiting, on superficial notice, red inflamed patches, from which extensive and rapid exfoliations of scales of morbid cuticle are constantly taking place, but on which no appearance of vesicular or pustular formation ever occurs. Dr. Willan thinks it is sometimes caused by

indurated papulæ originally springing from the true skin, and which, by their elevation and extension of the cuticle, produce some injury to this structure. This is, however, probably mere matter of conjecture, as the eruption of Lepra is rarely, if ever, preceded by diseases of a papular kind.

It is impossible to confound this disease with the scabs formed by the exsiccation or drying up of pustules or vesicles, if any attention be paid to it at its commencement. It is not meant by this assertion to deny that such mistakes have occurred, as stated by Dr. Willan; for in truth it may be asserted of almost all cutaneous diseases, that the eye of the careful pathologist has not been directed to them till very lately; and we are not therefore to be surprised at their having been so little understood by ancient writers.

The appearance which Lepra assumes at its commencement, is that of round red spots, elevated above the surrounding skin, and generally not larger than a split pea. If the finger be drawn over it, a degree of stiffness, or absence of the natural flexibility of the skin, is distinctly observed. In a day or two, if a minute examination be instituted, the spot is found to have a glossy, hard surface, a perfect semi-transparent scale having been formed,

the surface of which is smooth and polished. In a short time this scale separates; when the scite which it occupied exhibits no variation of colour, but a considerable degree of roughness and irregularity. The examination of the inner surface of the separated scale enables us generally to discover in or about its centre a minute protuberance, considerably softer than its bulk, and which has evidently occupied a corresponding hollow or excavation in the denuded surface. If force has been used to separate the scale, a speck of blood usually occupies this excavation, and the point described as the centre of the inner surface of the scale which occupied it is also similarly discoloured. As the diseased spot enlarges, fresh scales are produced, but these are entirely dry, and do not exhibit the appearances on their inner surfaces which belong to the original scale of the incipient disease above described. Neither are they found uniformly to extend over the whole diseased spot, in the form of one continued scale; as in this state, they separate partially and in patches, their dried edges giving a whitened, scurfy appearance, in some situations, where they are partially detached.

As the number and size of the spots increase, the limb, of course, becomes gradually

incased in a shield of scale ; and those in the neighbourhood of joints consequently become very troublesome, producing a considerable restraint on the motion of the parts.

There is one circumstance peculiar to this disease, which has been particularly mentioned to me by the patient, namely, a sensation of pricking, most frequently noticed a little before the separation of the first scale, when perhaps it has scarcely attained the size of a spangle. I am inclined to think this sensation the consequence of the raising up of the edges of the scale, produced by the tumefaction and elevation of the inflamed margin, and fresh growth of scale ; the centre which was attached to the cutis being thus forcibly torn from such attachment. This conjecture is rendered more probable by the fact, that when the disease is obviously subsiding, when no new scales rise up, and thrust those which were before formed from their attachments, the pricking in question is no longer felt.

In cases of long standing, and which have been much neglected, the glands secreting the nail are sometimes affected by the diseased action ; in consequence of which, the formation of these appendages of the cutis is incomplete, and they exhibit appearances at

their roots resembling the deposit of specks of matter in their substance. Sometimes, also, they act as extraneous bodies on the parts to which they are appended, producing much aggravation of the irritation, and a fluid discharge. I believe these appearances, however, are not common in cases originating in this country.

The elevated character of the spots, both at the commencement of the disease, and during its progress, is partly given to them by the morbid layer of cuticle forming the scale, such elevation being evidently less striking when the surface is cleared from this incumbrance. I think the remarks of Willan and Bateman, as to the non-accordance of the cutaneous lines on the diseased surface with those on the adjoining healthy skin, are incorrect in the majority of instances.

The parts of the body stated to be the most frequent seats of Lepra at its commencement, are the arms, fore arms and legs, from whence it extends to the trunk of the body, and sometimes, though rarely, to the head. When the latter circumstance occurs, like all other affections of the cutis extending to, or occurring in this part, it undergoes some change of character, dependent on the irri-

tation of the hair, and is attended with a fluid discharge.

Some slight variations in the character of the eruption appears to have influenced ancient writers in the use of distinctive appellations, and the example has been followed by Dr. Willan, in employing fresh descriptions, under the heads of L. Alphoides and L. Nigricans. The first of these is simply a less active state of the disease; the spots are smaller at their commencement, increase less rapidly, and the scales are less elevated in their centre. The dark colour of the latter, from which it derives its name, is evidently, according to Dr. Willan's own shewing, depending merely on debility and diminished energy of circulation. "The *Lepra nigricans* affects soldiers, sailors, scullermen, stage-coachmen, butchers, brewers, labourers, and others, *whose occupations are attended with much fatigue, and expose them to cold and damp, and a precarious or improper mode of diet.* Women habituated to poor living and constant hard labour are also liable to it. In two persons who came from India, the patches successively ulcerated, but at length healed, leaving a concave, though not deep cicatrix."

The duration of Lepra is very uncertain, it is always a tedious disease and sometimes continues through life. I have been lately watching the effect of the sulphur vapour bath on a patient who is now in full possession of constitutional health and strength, at 50 years of age, who has had it severely from his boyhood. During this period, the disease has traversed every part of his body repeatedly, but never at any one time entirely covered it; the enlarged spots gradually disappearing at one part, when others of smaller dimensions made their appearance in another. When the disease has been at its height, rising in the morning after the scales had been suffered for a day or two to accumulate, he describes his sensations to have been exceedingly strange and uncomfortable. Every motion of the body and fold of the skin was impeded by the rigidity of the scales, the crackling noise of which, attending his efforts to move about, were distinguishable to a bystander at some distance.

The characteristic pathological features of Lepra are sufficiently distinct and defined. The seat of the inflammatory action which constitutes it, is chiefly, perhaps entirely, situated in those vessels of the cutis, whose office it is to secrete the cuticle. The nature of this action too is sufficiently clear; it is evi-

dently of a chronic kind, as is proved by the minor degree of redness of the spots, compared to most other eruptions, and by the absence of tenderness or smarting. If the vessels of the cutis were all equally engaged in this action, we should have vesicles or pustules, and the secretion would not, as it now does, appear constituted entirely of morbid cuticle. Unfortunately, however, reasoning of this sort leads to no inferences which have been proved to be practically valuable; and the duties of the medical recorder consists, not in detailing successful principles or plans of treatment, but in stating that almost every kind of medicines, whether exhibited with or without a principle, have failed to be followed by any kind of advantage which could be satisfactorily attributed to their operation, and that only one or two are entitled to be considered worthy of trial, internally exhibited.

Bleeding and strong purgatives were, according to Dr. Willan, recommended by the Greek physicians; but the latter seem to have depended chiefly on external applications. Some of these were powerfully astringent, others corrosive and vesicatory, while a larger portion are unworthy of notice from their utter inertness.

Evidence has been at different periods ad-

duced in favour of the Bath, and Harrogate waters, both as employed externally and internally; and perhaps in the milder forms, as occurring in this country, they are generally beneficial. Warm bathing in salt, or in common water, if followed by friction, are also spoken of by Dr. Willan as sometimes efficacious*.

The aq. kali puri of the London dispensatory in doses of twenty or thirty drops, three times a day, the hydrarg. oxym. in small doses in the form of a spirituous solution, the arsenical solution, the decoct. dulcamara, and the sulphur vapour bath, seem to have the weight of recorded facts and results of attentive observation decidedly in their favour as remedies for Lepra. Of the first and second of these Dr. Willan has spoken with a due degree of caution; he says that the former is more generally beneficial than the nitrous and muriatic acids, which have been recommended, and found sometimes successful, and that the latter proves very useful, if continued for a length of time. The arsenical solution, of which I shall have to speak further hereafter, is entitled, however, to more confidence than either of these; but with respect to the pro-

* Willan on Cutaneous Diseases, p. 145.

perties of the dulcamara, I believe few persons have had an opportunity of confirming the report of Dr. Crichton.

The etiology of Lepra is involved in the greatest obscurity. It is probable that a temporarily debilitated state of system is very instrumental in producing it in many instances; but it is nevertheless true, that it often continues to spread, long after such state has been removed by appropriate management. "It is certainly not communicable by contagion, nor does it appear to originate from confinement to certain kinds of diet, such as fish, dried or salt meats, &c. But like some other cutaneous affections of a more transient nature, it is certainly produced occasionally by the influence of particular kinds of food and drink, which operate through the idiosyncrasy of individuals*." Dr. Bateman is quite at issue with Dr. Willan, as to the irritating influence of dry powdery substances lodging on the skin, as causes of the disease, and observes, that he has much more frequently seen it in young ladies, and persons of both sexes, in respectable ranks of life, than in bakers, bricklayers, &c. as noticed by the latter.

* Bateman's Synopsis, p. 29.

Diseases resembling Lepra and Psoriasis are certainly very frequently observed in young people, particularly females, in highly respectable circumstances in life, and under such circumstances they prove exceedingly unmanageable. In the majority of such instances, the hereditary origin is, I believe, easily ascertained. A light complexion, and peculiar harshness of the skin, exist in such cases where the latter is sound, and the scaliness and disposition to crack and form fissures is usually most troublesome in parts exposed to the drying effect of the atmosphere, as on the arms, hands, &c. In other parts of the body, as the edges of the arm-pits, &c. if the cuticle be minutely examined, it will be found extremely delicate, and easily irritated by the friction of the clothes; while the palms of the hands are horny and dry, and presenting none of that moisture and smoothness which belong to the part in the healthy state. The causes of these affections seem to consist in the original formation of the skin, and there is little or no ground to expect benefit from medicinal treatment: the history of such cases, however, is consolatory, for as the age of the patient attains maturity, and the constitution assumes the energy and stamina of the adult, the powers of the circulation become

more adequate to the regular and healthy nourishment of every part of the body, and a sounder and stronger cuticle is formed.

As regards the precise state of system under which Lepra first makes its appearance, it may be observed, that medical men are in the majority of cases precluded from obtaining positive information. The disease has usually made some progress before it comes under their observation, and the state of system existing at this period may be materially different from that formerly existing; it should not, therefore, be set down as that in which liability to the disease naturally exists. Diseased actions in other parts of the body will go on even to the destruction of life, without the continuance of the cause which originally excited them, and why should they not do so in cases of Lepra? In the case to which I have already alluded, it made its appearance in the person of a delicate youth, and now continues in a robust and healthy man of fifty. Deficient energy in the vessels of the skin, and consequent inadequacy to the production of healthy cuticle, may, I think, be fairly presumed to exist in this disease; and when the fact is taken into consideration, that the majority of cases appear under corresponding

states of the constitution, we shall not be far from the truth in pronouncing the original exciting cause to be of this kind. It is too true, however, that if this be the case, to remove the cause is not to effect the cure, since tonic medicines, with the exception of the Hydr. Oxym.* do not seem to be possessed of much power.

CHAPTER XIV.

Of Psoriasis.

THE meaning allotted to the term Psoriasis, as invented by Dr. Willan, is that of a disease as obviously dependent on disordered action of the vessels forming the cuticle, as that which has occupied the foregoing pages. The term Psora, as adopted by the Greek physicians, was evidently applied to the disease now termed Scabies; the characters of which it is scarcely necessary to say are totally unlike Lepra, or any dry scaly disease, in any of

* The most powerful tonic I know of, where great languor of circulation exists, is the Hyd. Oxym. in doses of one-fourth of a grain exhibited in tincture of bark.

Sir A. Cooper's Lectures, MS.

their stages; the term Psoriasis, therefore, as conveying an idea of analogy, is obviously improper.

From attentive observation of the varieties in figure, (for in point of fact, there are no other differences between this and the disease termed Lepra) I am fully convinced that all the purposes of useful discussion would have been effectually consulted in including them under one head with the latter. The information we have at present acquired in the modern study of cutaneous diseases does not enable us to find a better reason for their separation, than that afforded by the circumstance of its having been made by the ancients.

Dr. Willan says, that "From the Lepra it may be distinguished not only by the different form and distribution of the patches, but also by its cessation and recurrence at certain seasons of the year, and by the disorder of the constitution with which it is usually attended." Spots of genuine Lepra, however, fully answering the description of this author, as regards their local characters, not only appear now and then by themselves, accompanied by symptoms of constitutional disorder, but very frequently mixed with the irregular patches of Psoriasis, without such attendant sym-

ptoms. Medical men are often puzzled regarding the designation they shall give to an extensive scaly disease, because they are unable to determine to which of the two affections termed *Lepra* and *Psoriasis* it most nearly approximates. Its less tedious duration, and liability to recur, certainly constitutes a difference; but such difference depends simply on its extent, and the degree of irritability of skin of the patient. The latter circumstance also explains the superior degree of tenderness of the abraded cutis in *Psoriasis*; but with respect to the rhagades or fissures spoken of as another point of difference, it is proper to observe, that they are sometimes seen in round leprous patches, situated in the neighbourhood of joints.

The irregularly formed patches of this disease are, according to Dr. Falconer, (and it is an observation confirmed by the evidence of others) frequently following checks to the perspiration, by copiously drinking cold water when heated by exercise. The eruption of *Lepra* often occurs under the same circumstances. A variety of other occurrences, supposed in different cases to have given rise to it, are detailed also in the list of supposed causes of *Lepra*.

Besides the local varieties of *Psoriasis* which Dr. Willan has spoken of, he has enumerated

four of a general character, occurring on different parts of the body, appearing to be produced from constitutional causes only. These are the *P. guttata*, *diffusa*, *gyzata*, and *inveterata*.

The first of these, at its commencement, is formed of distinct and *small* patches, with *irregular* circumferences; they appear on almost every part of the body, and even on the face. The second consists of *large* patches, also *irregularly* circumscribed. The third, as its name implies, is of a tortuous or serpentine character; and the fourth begins in separate irregular patches, which extend, and become confluent, until at length they cover the whole surface of the body, except a part of the face, or sometimes the palms of the hands and soles of the feet, with an universal scaliness, interspersed with deep furrows, and a harsh, stiff, and thickened state of the skin. The production of scales is so rapid, that large quantities are found every morning in the patient's bed. The nails become convex, thickened, and opaque, and are frequently renewed; and at an advanced period, especially in old people, extensive excoriations sometimes occur, with a discharge of lymph, followed by a hard, dry cuticle, which separates in large pieces. "In this extreme degree it approaches very closely to the inveterate degree of

Lepra vulgaris in all respects, the only difference being in the form of the patches before they coalesce*."

The constitutional treatment of these which has been found most successful, consists chiefly of the exhibition of those remedies with the mention of which the consideration of *Lepra* was concluded. The state of the constitution and chylopoietic viscera should always obtain the first attention; and if any feelings of irritation in the diseased part should be experienced, saline aperients may be employed with advantage. The warm bath, as an application generally calculated to allay irritation, should be often had recourse to, in conjunction with gentle mercurial alteratives; and these together will be found adequate to the effecting the cure in the slighter cases; but if the disease assumes an obstinate form, the exhibition of the arsenical solution, or the use of the common or sulphur vapour bath may be individually or collectively had recourse to, with a tolerable certainty that, by their judicious management, a healthy state of skin may be brought about.

The manner in which the return to a healthy state of skin, both after *Lepra* and

* Bateman's Synopsis, p. 42.

Psoriasis is effected, is evidently by the diminution of the morbid excitement of the vessels of the part; the reddened margins of the diseased spots first losing their florid redness, and ultimately changing to a blue colour. When the scales fall off, a little scurf remains for a few days, and the natural colour of the part is resumed. This similarity forms another ground for the opinion of the analogy of the two diseases.

In the treatment of Lepra and Psoriasis, if no obvious benefit is derived by a patient exhibition of general alterative remedies, the frequent use of the warm bath, the common or sulphur vapour bath, the decoction of dulcamara, or such medicines as may be indicated by a chachectic state of constitution, the use of the liquor arsenicalis may be tried with the best hopes of success.

The *modus operandi* of this medicine is involved in much obscurity; there is, however, some reason to suppose that it is not unlike that attributed by Mr. Hunter to mercury, in the cure of Syphilis. It is certain, that in the diseases under consideration, if employed in small doses, and not followed up and gradually increased to a much larger extent than is commonly supposed prudent, it loses much of the estimation which ought

properly to belong to it. The extreme care and circumspection necessary in its exhibition is itself a restraining consideration in its employment; but if an inveterate disease can be cured by medicinal remedies, such care ought to be readily given.

I am in possession of some notes of a case answering to the description of Psoriasis inveterata, which have been handed to me by Mr. Gaskoin, of Clarges-street, whose various and well-executed drawings of cutaneous and other diseases have obtained for him no ordinary degree of credit. The case in question was treated by Mr. G. in the hospital of St. Louis in Paris. The arsenical solution was commenced in doses of two drops exhibited twice a day. The case was attentively watched, and the dose gradually increased, without any untoward symptom occurring, for the space of two months; at the end of which period, no less than thirty-eight drops were exhibited for each dose. At this time nausea and sickness being complained of, the medicine was suspended; a very important and rapid change in the state of the disease having occurred within the last few days. Three days after, the severe colicky pains commonly following the exhibition of the medicine, even in much

smaller doses, if less gradually administered, came on, followed by cold perspirations and great constitutional disorder. Opiates and cordials soon relieved these symptoms; and so satisfied was the patient of the good effects of the treatment, that, though a trifling degree only of the disease remained, he was anxious to return to the use of the medicine. The case was ultimately, though of years standing, completely cured by adhering to the same plan.

On the subject of the sulphur vapour bath in Psoriasis, the following case which has been treated at Mr. Green's establishment in Bury-street, may, with propriety, be inserted here. It is by no means, however, an extraordinary instance of the effect of this remedy.

Case 1.—The subject of this case was a gentleman about forty years of age, who from his boyhood has been afflicted with a most inveterate cutaneous disease, but from which he is sometimes quite free. His parents were not known to have had any skin disease, and he has no clue to enable him to account for its origin. When this gentleman was first subjected to the employment of the bath, he was unable to walk; his legs, from the toes to the middle of the thighs, were incased in a thick scab, with long deep fissures, from which issued an abundant ichorous discharge. The

thighs above this were studded with impetigenous pustules, the sacrum, gluteus, muscles, and part of the lumbar region were likewise covered with scab containing deep cracks. The arms and axilla on one side were covered with large patches of scab, all discharging the same kind of fluid. He was obliged to move with great caution, lest he should extend these cracks, or occasion fresh ones, which were always attended with much pain and inflammation. He had been in the habit of taking and persevering in the use of medicine, but was not aware that he derived much benefit from it.

He was directed to take three emollient vapour baths, and afterwards to persevere daily in the use of the sulphureous fumigating bath, and to take occasionally opening medicine. After the third fumigation, the amendment was evident, and he expressed himself much more comfortable in his feelings; he continued them for a fortnight with regular progressive improvement. At the expiration of a month, the arms and axilla were well, and the scab on the legs was now only in patches, the left leg being much the best. There now came on a fresh accession of disease, showing itself in pustules with yellow heads a little above each inner ancle; higher up there were numerous small vesicles

containing clear lymph; some other parts of the legs still, however, went on improving, and the fumigations were continued; this accession was not of long continuance, but scabbed over, healing underneath. He now complained of heat and itching in the face, particularly about the chin; he had slight feverish symptoms, for which he was directed a dose of the sub. mur. hyd. and some saline medicine: he became relieved: achores made their appearance and gradually spread over the lower jaw, containing yellowish matter, forming scabs, with surrounding inflammation. To this part he pretty constantly applied flannels wrung out of hot water, and covered it with a bread and water poultice at night; there was no cracking of these parts, but much watery discharge.

He had used the fumigations daily six weeks, he now complained of stiffness, itching, and redness in the left groin; on examination, the inguinal glands were enlarged, hard, and painful to the touch; as the swelling of the glands subsided, the redness increased, and he had intertrigo, which became very troublesome to him. A space the size of a large dollar next made its appearance on the right clavicle, near the humerus, of a bright threatening aspect, and a smaller spot of the same appearance showed itself on the left clavicle,

both itching very much, and with moist exudation; these spots in forty-eight hours became joined by an inflamed line about an inch broad, hanging, as it were, like a necklace; round the larger spot there came many small sized pustules with yellowish matter in them, these did not extend; the large spot gradually became whiter in the middle, extending to the edges, disappearing slowly, leaving a shining, smooth red surface, which, with the connecting line, gradually went away: of the intertrigo he was not quite well when business called him into the country. The legs, back, and arms were quite well: the gentleman used the baths seven weeks.

I frequently observe pustules and vesicles at the same time in impetiginous patients. The affections of the face seemed to be the *Porrigo favosa*; the intertrigo again was of a distinct order; the affection of the chest seemed to have been communicated from the chin, perhaps conveyed by frequent looking at the intertrigo of the groin, as was his custom when naked going into the bath, and, perhaps, when going to bed at night.

The predominance of the scaly state over that in which pustules existed in this case fully justifies its consideration as a case of Psoriasis, though at the period when the

eruptions of pustules occurred, the parts where the latter were situated very closely resembled the more aggravated cases of Impetigo. The case has been drawn up entirely by Mr. Green; and since the period at which he forwarded it to me, I learn that recovery has been perfected, and a healthy cuticle established on every spot which the disease occupied.

The case of Lepra, to which I have alluded in a former page *, has undergone a most important improvement by the employment of the sulphur vapour bath, though the regular exhibition of the remedy has been materially interrupted. The disease has been existing from boyhood, and manifested but little change for the first few weeks of this treatment; but after that time appearances of a beneficial change began to be visible. The pricking sensation, which I have before noticed, as dependent on the formation and extrication of fresh scales from the surface, gradually diminished, and ultimately ceased to be felt. No new spots continued to make their appearance, and those already formed ceased to extend, or to be covered by scales of the thickness of the former. The margins of the larger spots continue to assume a bluish cast, and

* Page 289

ultimately to disappear; the skin of the arm, lower part of the back, and nates, which were previously covered by scales, are, I understand, now returned to a perfectly healthy state.

The arsenical solution, and the sulphur vapour bath, promise, if used scientifically and carefully, to become instruments of pretty uniform power in the cure of the diseases under consideration. It seems not improbable that the due and efficient administration of the former has been often interrupted by the consequences of want of circumspection, and inattention to the gradual increase of the doses, and that the extent to which it has been hitherto administered may be very considerably increased with advantage.

The irritation of skin attending scaly diseases generally may be considerably diminished by frequent ablution with warm water; and, if the tenderness be not too great, gentle friction may be had recourse to. By such means, that accumulation of scales, which so encourages the lodgment of irritating secretions, will be prevented, and the latter removed almost as soon as formed. There are opinions on record, indeed, that these measures deserve the consideration of certain remedies in many cutaneous diseases.

In the 16th vol. of the Edinburgh Med. and Surgical Journal, Dr. Morrison, in a paper on this subject, describes a *modus operandi* of this kind, which he has found extremely successful. "I dip," says he, "a sponge in lukewarm water, and after squeezing it hard, so that only dampness remains, I cover it with oatmeal; with this the parts are rubbed for some length of time, the sponge being frequently dipped in oatmeal, and this operation is repeated two or three times a day, according to the urgency of the itching, and other symptoms. After the parts have been sufficiently rubbed, they are washed, and gently dried. Oil is then applied by means of a varnish brush, and the parts covered up with slips of linen."

A case of Psoriasis inveterata, of twenty months standing, is particularly mentioned as having been cured by this plan in the space of seven weeks. If bleeding should occur during the process, it is not permitted to interrupt the operation, and is rather productive of beneficial effects than the reverse. Should pustular formations occur, they are to be freely broken down, the secretion cleared away in this manner, and their sites subjected to the friction in common with other parts. There is every reason to believe this practice capable of producing the best effects

in such diseases, particularly in conjunction with the use of the sulphur vapour bath. Dr. M. seems to have been so convinced of its value, as to think its application justified in cases of small-pox, to the extent of breaking down every pustule as soon as formed; and, according to his opinion, it would be found capable of preventing the secondary fever*.

Previous to dismissing the subject of Lepra and general Psoriasis, it may be as well to direct the reader's attention to some observations of importance recorded in the pages

*However extravagant this proposition may appear at first sight, a due consideration of the question will perhaps lead to a different view, and give it rather the character of bold and energetic practice. It is very true, that the breaking down and rubbing away the contents of the fully matured vesicle in a confluent state would be attended with much pain and irritation, and, perhaps, would be dangerous from the extent of surface thus abraded; but it is not so certain that positive mischief would arise, if such step was taken at an earlier period of the disease, and as soon as the vesicle was completed. Whoever has seen the contents of the fully matured vesicle resting on the cutis for so many days, its contents partly absorbed, and partly undergoing the process of exsiccation on the skin; the powers of the constitution having been exhausted in its original production, and being now evidently sinking from the prejudicial influence of the demand upon it to repair the extensive mischief which the disease has produced, will think it a matter worthy of serious reflection. The practicability of the plan is another question.

of periodical works, from which additional information of importance, or, at least, suggestions worth attending to, may be extracted, under circumstances of difficulty, in treating these diseases or their sequelæ.

Mr. Cuming, in the twelfth volume of the Medical and Physical Journal, records a case in which considerable difficulty was experienced in removing the cracks or fissures of the disease in the hands, after it had been removed from other parts of the body. The use of blisters, under these circumstances, produced the desired effect, and was followed by a healthy state of the skin.

On the subject of the internal use of arsenic, a communication by Dr. Girdlestone, of Yarmouth, in the 15th vol. of the same work, contains some observations which are highly valuable, as inculcating the necessity of a due degree of caution in the exhibition of this remedy. In one of the cases which he has detailed, three doses of eight drops each were followed in twenty-four hours by erysipelas, leading to the temporary suspension of the remedy, which was subsequently renewed, and produced a speedy recovery. Another case, detailed in the same place, was cured by the same means, but was attended previous to its final disappearance by boils on the affected

parts. Dr. G. further observes, that when the disease was removed by this medicine, a commonly previous effect of it was a temporary aggravation of the irritation which characterised it with the appearance of boils or fissures.

In the 17th vol. another case is recorded, in which it appears Dr. Batty was induced to try the arsenic from Dr. Girdlestone's recommendation of it. In this case almost every species of local application had been tried without success. Ointments of calomel, of white and red precipitate, ung. hydr. nitrat., a solution of lunar caustic, ointments of tar and sulphur, and a variety of internal medicines had all been subjected to a fair trial without important benefit before this medicine was had recourse to: the effect, however, was a speedy recovery.

The use of kali sulph. is, I think, in the same vol., stated by Mr. Earnest to have been equal to the cure of a case of Lepra. It was exhibited twice a day in doses of two scruples, a solution of it being at the same time employed as a lotion. I have given this medicine a fair trial since, without any apparent good effect.

I have already offered some remarks on the

subject of hereditary origin of scaly diseases. I cannot believe that any thing beyond a certain dryness of the cuticle, dependent on the original formation of the cutis, can be communicated in this way, though such dryness and disposition to crack and form a species of Psoriasis may be much aggravated by accidental circumstances. In parts of the world where cretenism prevails, leprosy is almost constantly observed; and owing to the other disgusting appearances which these outcasts of the human race exhibit, it is vulgarly supposed, like this degeneration of the species itself, to be hereditary. Under such circumstances, however, its causes may be much more satisfactorily referred to the habits of its miserable subjects; for there can be little doubt, that filth and idle habits are, at all times, capable of acting as powerfully exciting causes. "Hereditary diseases do not naturally and necessarily attend the human race. Leprosy, madness, gout, scrofula, spring out of certain practices: they were all acquired, and probably will be eradicated. Leprosy, originating in want of personal cleanliness, has already given way to improvements which have taken place in that respect. Linen is now substituted for woollen in many articles of dress, and other regulations equally friendly

to cleanliness have caused leprosy almost to disappear *."

It is singular that the ancient description of leprosy, as given in the 13th chapter of Leviticus, applies to the disease, as it is often seen at the present day, with so much exactness. It is here spoken of as "a rising, a scab, or bright spot;" and it is further remarkable, that the diagnosis between this and other diseases should be laid down with rules of exactness equally applicable at the present day; indeed, the disease seems from this historical record to present the only instance in which deviation from original character has not, in some respects, in the lapse of so much time, been undergone. After fourteen days, "the priest shall look on him again, and, behold! if the plague be *somewhat dark*, and *spread not in the skin*, the priest shall pronounce him clean." The first indications of return to health of the part occupied either by Leprosy or Psoriasis are well known to be the dark appearance evidently here alluded to, and its ceasing to extend.

The local situations of the more limited forms of dry scaly diseases have, as in the consideration of Herpes, formed the founda-

* Dr. Jarrold.

tion of separate designations in the arrangement of Dr. Willan. The *P. labialis*, *P. palmaria*, *P. ophthalmia*, *P. preputii*, &c. are instances of this. The remarks, however, which I have thought proper to make on this multiplication of terms in Herpes apply with equal propriety here, particularly as the same plan of treatment in such local varieties is found equally successful in all; the only local application generally necessary, after the exciting cause is removed, being that of a little of the ointment of nitrate of mercury in a diluted state.

This latter remark particularly applies to the disease as occurring about the eyes, on the scrotum, on the arms of washerwomen, and the backs of the hand. On the prepuce and palms of the hands greater difficulties are experienced, because the motion of the part is frequently tearing the bottom of the cracks open, and causing blood to flow from them, and producing great inflammation and increase of heat and dryness; the same mischiefs occur in fissures of the lips, as most persons at some period or other have opportunities of experiencing.

The *P. palmaria*, as it has been termed, and that occurring on the back of the hand, stated to be peculiar to bakers; that also spoken of as peculiar to washerwomen, have

their origin, generally, in entirely local causes. Inattention to cleanliness, and the constant application of dry, heated, powdery substances, are uniformly found to have acted as causes in the two first; while actual solution of the cuticle, and partial abrasion of the tender surface of the cutis, constitute the mischief which characterises the latter. It is well known that strong solutions of potash speedily act on the cuticle in any part of the body, and that in the labours of this class of persons, this alkali is used in great abundance. Its operation is also farther increased by the addition of friction. The part which has been chosen for representation in Dr. Bateman's plate is about the middle of the forearm, to which part they are accustomed to immerse the arms, and where it is obvious the fluid lodges, dries, and becomes more concentrated. Sedative applications are most successful in these cases: the warm bath and diluted liq. plumb. acet. alternately for the first few days, and afterwards the application of the nitrated mercurial ointment before mentioned, form the best plan of treatment; but should any degree of obstinacy be manifested, the application of sulphur vapour will soon remove the difficulty*.

* In these local affections, it is desirable to have the

Due regard should of course always be had, even in those cases above mentioned, to the state of stomach and bowels, for even in the most trifling cutaneous affections, disorder of these organs materially impedes recovery ; but as regards the Psoriasis of the lips and prepuce, some such disorder will be generally found to an extent capable of acting as a direct cause in the production of the disease, and therefore requiring the first attention.

On the subject of the disease situated on the latter of these parts, it may be necessary to notice, as we have done in a former instance, the description given by Mr. Evans. "This disease," says he, "appears in the form of deep cracks or chasms around the margin of the prepuce, which are extremely irritable, and apt to bleed whenever any attempt is made at retraction, and which are generally, from the loose cellular structure of the part, much deeper than when the disease occurs on the lips. The discharge is of a glutinous nature till the morbid action ceases, when it becomes purulent, and then the healing process begins, which is often very tedious.

vapour only applied locally. Mr. Green has so modified the apparatus of one of his baths, as to admit of this without the unnecessary trouble attendant on completely undressing, &c.

“In the treatment of this complaint, I have found the ung. hydr. nitrat. diluted to half its strength the best application.”

CHAPTER XV.

Of Pityriasis.

THE worst forms of the affection termed Pityriasis are commonly, even by the patients themselves, thought of the slightest importance. Scurfy exfoliations of the cuticle simply may be said to constitute the disease, and no appearance of active inflammation ever occurs during its continuance. It now and then, though very rarely, is accompanied with redness and slight sensations of itching; and when the scurf is rubbed off in these cases, the cuticle remaining is evidently exceedingly delicate.

The most common situation of scurfy accumulation is the hairy scalp, and when situated here, it is familiarly designated dandriff. This form of the affection is most frequent in the infant, but adult persons of dark complexions, and those of native Indian extraction, are particularly liable to it, though

it is in them generally removed with facility.

It may be considered, generally, as indicating debilitated action of the vessels secreting the cuticle, by which a delicate and ill-formed production of this substance is effected. The causes of this local debility of vessels are sometimes constitutional, and in adults it often follows great and exhausting exertions, and consequent debility of system. When this state of things is manifest, of course constitutional remedies of a tonic kind should be had recourse to. The exhibition of bark, a better mode of living, and less labour, the use of cold sea bathing, &c. constitute what is usually required under such circumstances.

Like Psoriasis and Lepra, it sometimes continues after the causes originally producing it have ceased to exist; in which case, supposing the cause to have been debility, as above alluded to, which may subsequently have been removed, local applications form the chief grounds of dependance. The very best among these is diluted spirit, in which a few grains *

* R. Zinci acetat, gr. xij.

Aq. distill.

Alcohol ā ʒvj. M. ft. lotio.

of the acetate of zinc have been dissolved. With this lotion, the part affected may be bathed morning and evening with a soft sponge, the patient availing himself of the sedative effects of the evaporation of the spirit from the surface.

Where the skin is originally of a preternaturally irritable kind, the scales may be thicker, and much itching may prevail; in which case, it may, perhaps, be advisable to employ the warm or sulphur vapour bath, as recommended in the treatment of Psoriasis. Under such circumstances, indeed, Pityriasis approximates very nearly to the milder cases of this affection.

When Pityriasis occurs on the scalp of children after the hair has grown pretty thick and strong, great necessity exists for strict attention to cleanliness and frequent ablution. Cases, no doubt, have occurred in the children of the lower classes of people, where the accumulation of scurf had been the primary cause of confirmed Porrigo. Hence, if common attention to cleanliness be not adequate to the complete removal of the scurf, it will be proper to remove the hair, and make use of the sedative evaporating lotion prescribed.

On the varieties, as they have been termed, designated *P. rubra*, *versicolor*, &c. I have

nothing to offer; they appear to me calculated to answer no other purpose than that of confusing the student, and throwing a veil of complexity over a subject exceedingly trivial, and easily understood.

The disease termed Pellagra, though unknown in England, and not satisfactorily ascertained to belong exclusively to the dry scaly class under consideration, would be perhaps in this part of our subject not passed over without impropriety: the following description is extracted from the paper of Dr. Holland, in the eighth volume of the *Medico-chirurgical Transactions*. I am not aware that any fact of importance, either as regards its pathology or treatment, which is not here spoken of, has been recorded elsewhere.

The pellagra, as an endemic disease, prevails chiefly in the plains of Lombardy, which are fertile even to luxuriance. The principal objects of cultivation, besides the produce of vineyards extensively spread over their surface, are maize, rice, and millet. In some districts, and particularly between the rivers Adda and Ticino, the pastures are extensive, and yield a considerable produce of milk, from which the Parmesan cheeses are made. Latterly the disease has been confined to no particular situation, varying in the degree of fertility of

soil, or purity of atmosphere, but has been recognised as increasing in every part of Lombardy, as well on the plains as among the hills which rise on their northern border towards the Alps." Dr. Holland has seen it also "in the province of Friuli, the district which intervenes between the foot of the Carinthian Alps and the northern shore of the Adriatic.

"The pellagra is confined almost exclusively to the lower classes of people, and chiefly to the peasants and those occupied in the labours of agriculture. It appears first in a local cutaneous form, sometimes preceded by languor and indications of a general cachectic state of body. The local symptoms very generally show themselves in the first instance *early in the spring at the period when the mid-day heat is rapidly increasing, and when the peasants are most actively engaged in the labours of the field.* The patient perceives on the back of his hands, on the feet, and sometimes, but more rarely, on other *parts of the body exposed to the sun,* certain red spots or blotches, which gradually extend themselves with a slight elevation of the cuticle, and a shining surface, not unlike that of Lepra in its early stage. The colour of this eruption is somewhat more obscure and dusky red than that of erysipelas; it is attended with no other

sensation than that of slight pricking or itching, and some tension in the part. After a short continuation in this state, small tubercles are frequently observed to arise on the inflamed surface, the skin almost always becomes dry and scaly, forming rough patches, which are excoriated, and divided by furrows and rhagades. Desquamation gradually takes place, which, though it leaves behind it a shining unhealthy surface in the parts affected, yet, in the first year of the disease, is rarely followed by a repetition of the appearances just described. Towards the close of the summer, or occasionally still earlier, the skin has resumed nearly its natural appearance; and but that the farther progress of the disease is familiar to every inhabitant of the country, the patient might be led to flatter himself that the evil was gone by, and that there was no particular reason to dread its recurrence.

“ With this local affection are connected, even in the first period of the disease, certain general symptoms, which are important, inasmuch as they indicate the constitutional nature of the malady. Debility of the whole body; vague and irregular pains of the trunk and limbs, but especially following the track of the spine and dorsal muscles; headache,

with occasional vertigo; irregular appetite, and general depression of spirits; these are the more ordinary symptoms which attend the early part of its progress. The bowels are, for the most part, relaxed, and usually continue so in the further course of the disease. There are no febrile symptoms; and in females the menstruation is generally continued without irregularity.

“The remission which the patient obtains during the autumn and winter of the first year, is almost universally followed by a recurrence of his symptoms in the ensuing spring, under a more severe form, and with much greater disorder of the constitution. The cutaneous disorder is renewed, and spreads itself more extensively; though still affecting chiefly the hands, neck, feet, and other exposed parts of the body. The skin becomes callous and deeply furrowed; and large rhagades show themselves, especially among the articulations of the fingers. From the cases I have seen of the cutaneous affection in this stage, I should speak of it as most resembling the inveterate degree of Psoriasis, or of the *Lepra vulgaris*, with some affinity certainly to the *Ichthyosis*, under which, as I have already mentioned, Alibert has classed it. The debility is greatly increased in the

second year of the complaint, frequently depriving the patient of all power of pursuing his active labours, and rendering him peculiarly susceptible of all changes of temperature. Partial sweats frequently break out without any obvious cause. All the nervous symptoms of the first year are renewed in more severe degree; there is a general tendency to cramp and spasmodic affections; the mind begins to suffer under the disorder, and the feeling of anxiety and despondence is very strongly marked. The symptoms already noticed make progress as the heat of summer advances; and with greatest rapidity in those patients who are much exposed to the sun. As in the preceding year, they begin to decline towards the middle or end of autumn; but the remission, as well of the local affection, as of the general disorder, is much less complete than before, and the patient continues to suffer during the winter from the debility, and other effects consequent upon the disease.

“In the third year every symptom is renewed at an earlier period, and in an aggravated degree. The constitutional malady shows itself under a variety of forms; some of the symptoms having considerable analogy to those of scorbutus, all of them indicating a general cachexy of habit, and more particularly

a lesion of all the voluntary functions. The debility now becomes extreme; the patient is scarcely able to support himself, and the limbs, besides their feebleness, are affected with pains, which still further impede the power of motion. The diarrhoea continues, and tends of course to augment this debility. Frequently a dysenteric state of the bowels comes on in the latter stages of the disease. The breath is generally fetid; and the odour of the matter perspired often extremely offensive. The appetite and digestion are irregular, yet, on the whole, perhaps, less affected than most of the other functions. Dropsical effusions now frequently come on: occasionally ascites, but more commonly anasarca. Vertigo, tinnitus aurium, and double vision, are almost universally concomitants of this stage of the disorder, and all the senses become exceedingly impaired. Some spasmodic affections are general, and these not unfrequently take a very decided epileptic form.

“Connected with these latter symptoms is the effect which the pellagra produces upon the minds of those suffering under the malady, which effect forms one of the most striking circumstances in the history of the disease. The anxiety, watchfulness, and moral depression of the patient are rapidly augmented.

In the hospitals appropriated to the reception of such cases, the pellagrosi afford a melancholy spectacle of physical and moral suffering, such as I have rarely had occasion to witness elsewhere. These unhappy objects seem under the influence of an invincible despondency; they seek to be alone, scarcely answer the questions put to them, and often shed tears without any obvious cause. Their faculties and senses become alike impaired, and the progress of the disease, where it does not carry them off from debility and exhaustion of the vital powers, generally leaves them incurable idiots, or produces occasionally maniacal affections, which terminate eventually in the same state. As a striking proof of this tendency of the disease, I may mention the fact, that at the time I visited the lunatic hospital at Milan, there were very nearly 500 patients of both sexes confined there, of which number more than one-third were pellagrosi; people brought thither by the termination of their disorder, either in idiotcy or mania. Even this statement gives little adequate idea of the ravages of the disease in this mode of its termination. The public hospitals of the country are wholly incompetent to receive the vast number of persons affected with the pellagra; and the greater proportion of these

unfortunate people perish in their own habitations, or linger there a wretched spectacle of fatuity and decay. Where debility, as generally happens, is the cause of death, it manifests itself in the latter stage, with the usual concomitants of colliquative diarrhoea, spasmodic affections, and coma; and produces a degree of emaciation, scarcely to be surpassed in any other disease."

The mania consequent on pellagra is often of a violent kind: when it makes its appearance, the disease is in some degree retarded, and the strength less rapidly declines. Though the period which the disease lasts has, for the convenience of description, been spoken of as three years in the preceding account, it is generally of much longer duration, being renewed every spring, and disappearing again in the autumn. Change of situation and mode of life is found useful; but the class of society to which the patients belong renders this step generally impracticable. If no remedial measures are adopted before the third or fourth year of the disease, little benefit arises afterwards from the adoption of any plan of treatment.

Dissection discovers no organic affection of uniform occurrence, though visceral disease is not uncommon. Dr. Holland, however,

considers these affections, when discovered, as more probably the consequence than the cause of the pellagra. Hereditary origin has been generally traced by different authorities in a satisfactory manner, both sexes being equally liable to it.

The disease has gradually become more and more prevalent within the last fifty years ; from which consideration chiefly, Dr. Holland supposes that " it depends on some present peculiarities in the mode of life of the peasants of this country ;" an idea which historical facts completely support, as it is evident that a multitude of powerful and concurring circumstances have, during the period specified, continued to operate in breaking down the spirit, and impoverishing the resources of this unfortunate class of people. The wars which have so often devastated the country, frequent changes of political state, variable systems of government, heavy taxes and imposts, and last of all, a general heart-breaking conviction that patient submission to such grievances, or the most industrious efforts to bear up against them, were alike unrewarded by an ultimately beneficial change, are circumstances calculated to break down the proudest spirits, and poison at their very sources those incentives to contented and

industrious exertion on which the health and comfort of the peasantry of all countries is well known chiefly to depend. To these causes may be added a decaying state of commerce, and a faulty system of arrangement between the landlords and the cultivators of the soil, all tending to depress agriculture, and to reduce the peasantry at large to much misery and privation.

There can be no question, that the observations of Dr. Holland, above alluded to, are, to their full extent, correct, as regards the causes producing this disease: thus the terrific and heart-rending picture is presented to us of an extensive population, inhabiting a country rich in all the gifts of a beneficent Providence, endowed in an extraordinary degree with all those properties of the soil which are necessary to the utmost luxuriance in the production of all the requisites of life, given up to the ravages of a demoralising and disgusting disease, from the simple influence of bad government, and the desolating effects of war.

Pellagra may, perhaps, be correctly defined a species of Psoriasis, aggravated by inattention to cleanliness, low living, and extreme poverty; the local cutaneous affection obtaining its only variations in character from this

disease, from the irritation attending continued exposure to the heat of the sun. In giving the foregoing brief sketch of Dr. Holland's paper, it would be unjust to neglect stating that the original will be found still extremely interesting, and containing remarks and observations which may be read with the greatest advantage.

OF ICHTHYOSIS, OR THE FISH SKIN DISEASE.

Ichthyosis usually makes its first appearance in a form unequivocally showing its origin in a chronic inflammatory action of the vessels producing the cuticle. A morbid thickening, with a dry and harsh state of this covering, is the first circumstance worthy of observation in the disease. The patient rarely complains of any uneasy sensation at first, but as the thickening of the cuticle increases, a distinct sensation of increased heat is felt, and some marks of irritation and redness are observed on the healthy cutis round the margin of the diseased spot. In the course of a short time the diseased cutis rises above the surrounding parts, and its surface begins to exhibit the appearances of minute and innumerable fissures, which, after a short time, become elongated and extensive cracks,

intersecting each other, and dividing the surface into innumerable portions, each of which, individually considered, exhibits great similarity in structure to the common wart. When the growth of the diseased structure has attained the height at which roughness of its surface, and the minute fissures described occur, it assumes a dusky and dark-brown colour, which colour, as the morbid parts continue to grow, gradually approaches blackness. This appearance, however, does not naturally belong to the disease, but is given to it by the entanglement of dirt, from which it is impossible to protect it, on account of its peculiarity of structure, even though frequent ablutions are had recourse to.

The idea of its analogy in formation and appearance to the skin of any kind of fish, from which it derives its name, is evidently erroneous; the dry, hard cuticle of the elephant, and some other animals of the larger class, whose skins are not plentifully covered by hair, present a much nearer resemblance; in point of fact, however, it is a formation which is not analogous to any thing that is often seen but the common wart of old standing, and even this resemblance exists only in structure, the connexion of the latter with the cutis being considerably closer, and

its separation effected with much more difficulty and pain. The sensation on drawing the finger along the diseased surface is precisely similar to that occurring from this proceeding on the surface of the larger and old standing warts.

The arms and legs are the most common situations of Ichthyosis: its occurrence on the face, as represented in the 18th plate of Dr. Bateman, is, comparatively, exceedingly rare. Whatever may be its situation, its causes seem to be equally obscure. It has not appeared, in any instance which I have witnessed, to be dependent on, or in any way connected with, constitutional derangement, nor has any cause of local irritation been discovered to have existed before the disease appeared in any one instance.

There are several instances of this deformity recorded, where hereditary origin has been distinctly traced. Dr. Girdlestone* and Mr. Martin† have both furnished cases of this kind to periodical publications, where the disease extended over the greater part of the body. In the cases reported by the first of these gentlemen, the father and grandfather

* Med. and Physical Journal, vol. 8.

† Vol. 9, of Medico-Chirurgical Transactions.

of the patient had been subject to it; and in those by Mr. Martin, a mother and child, it having made its appearance as early as three months after birth in both, and ultimately extended over every part of the body, except the head and neck. Dr. G. observed an usually florid complexion prevailing in the family whose cases form the subject of his report.

When the disease occurs under such circumstances, it is more than probable that medicinal treatment of every kind will fail to produce any alteration, depending as it does on the original formation of the skin. When only local, and of small extent, remedial measures may be taken with a fair prospect of success. In those cases, however, which I have had an opportunity of observing, no benefit has been derived, either by the use of pitch or arsenic, both of which have been spoken of as occasionally productive of benefit. Neither has any good resulted from the use of ointments. The frequent soaking of the parts in warm water, and gradually picking off the excrescence, as recommended by Willan and Bateman, will scarcely be practicable, even in cases of the most limited extent; and if effected, does not at all diminish the morbid disposition in the vessels of the part.

I have had two opportunities recently of submitting this disease to the combined influence of pressure and the cold lotion. Both these were situated on the leg, and as no disorder of the system or digestive organs could be traced, internal medicines were not had recourse to. Considering inordinate action of the vessels on the surface to be manifested both by the heat which was present, and the rapid growth of the excrescence, it appeared that the *modus operandi* of these measures was well adapted to the cases. Adhesive straps were applied as tightly as could be borne with comfort over the whole of the diseased part, extending a little above and below it, and these were supported by a bandage. The latter was kept constantly wetted with the lotion, and at the end of four or five days removed. At this period, the excrescence was found liberated from its attachment to the cutis, and came off in large pieces nearly through its whole extent, exposing a white and ill-formed cuticle, which might be scraped off in great quantities without pain. By perseverance in the same plan of treatment, the cuticle gradually assumed a strong and healthy state, and a complete cure was in both cases ultimately effected.

In a case of that form of Elephantiasis,

termed the Barbadoes leg, some time since in St. George's Hospital, the cutis, particularly on the superior part, was covered by the same dry, dark-coloured excrescence, which belong to the older standing cases of Ichthyosis. It is very correctly represented in a drawing of the case made by my friend Mr. Gaskoin, and is, I understand, constantly observed, more or less extensively, in every instance of this disease. The case in question was, I believe, materially benefited by the diligent and scientific application of pressure by means of bandages.

Of what has been termed Ichthyosis cornea, it may be unnecessary to say much here. I am not aware that any light has been thrown on the subject of its pathology since the publication of Bateman's Synopsis. Of horny excrescences arising from the skin, there are a great number of instances recorded. Their removal seems to be a simple operation, not followed by any bad consequences.

A long list of references to cases and descriptions has been given by Dr. Bateman*, which the curious reader may be gratified in consulting.

* Synopsis, p. 54.

OF WARTS.

Warts appear to be produced by disordered action in a congeries of vessels on the surface of the cutis, and commonly originating from the irritation of substances which insinuate themselves into, and, perhaps, sometimes through the substance of the cuticle. Their structure and formation are almost too well known to require description; they are, however, evidently resembling the cuticle, and may be considered an irregular production of this covering. It is said by some surgical writers, that they are readily and easily destroyed by stimulants or caustics. This is true as regards those occurring on parts covered by an extremely delicate cuticle, as the glans penis, &c. a very slight degree of excitement only being necessary to their destruction in these situations; but when they occur on the hands, the most expeditious mode is as follows: A small portion of the *Emplas Lyttæ* is to be laid on the crown of the wart, and retained in this situation by adhesive plaster: in a day or two the substance of the wart is in a soft and moistened state, and a little ring of vesication appears round

its root. The wart may in this state be picked or cut off level with the cutis, and the lunar caustic, or a minute portion of sulphuric acid, applied directly to the surface, from which it has grown. It rarely happens, if this plan be followed, that any further morbid growth takes place.

Corns are composed of a thickened and horny growth of cuticle, and are usually the effect of pressure by wearing tight shoes. The removal of their cause is the only efficient manner of treating them, or of obtaining any thing like permanent comfort. They may be softened and thinned by the application of sulphuric acid diluted with an equal quantity of water, while the object of defence from pressure is best effected by means of circular pieces of adhesive plaster laid one on another till of sufficient thickness to be raised above the level of the surface of the corn. Layers of chamois leather form a somewhat softer padding than this, and may be secured on the part by a strap of adhesive plaster.

SECTION V.

On diseases of a mixed character essentially dependent on active inflammation, with which the constitution is not necessarily connected.

CHAPTER XVI.

Of Impetigo.

IN speaking of diseases of a mixed character, it is intended merely to apply this phrase to their local appearances. Impetigo, in different cases and their stages, exhibits vesicles, pustules, and regularly formed scales, very much resembling those of Psoriasis. Vesicles and pustules also alike characterise Scabies and Eczema. With respect to the latter disease, it must be confessed, that its claim to introduction here is somewhat equivocal, if the more formidable cases of it, from the use of mercury, be borne in mind: the

reader will remember, however, that the object of the author is an arrangement, with a view to perspicuity in the present treatise, rather than the substitution of a new classification for that of preceding authors.

Under this head, therefore, I propose to consider the varieties of Impetigo, of Scabies, and of Eczema; the whole of which, in by far the larger portion of cases coming under our notice, may be referred to local causes, and, as regards their local characters, very much resemble each other.

The descriptions of Impetigo, which have been heretofore given, do not appear to have been founded on sufficiently minute observation of the origin and progress of the disease, and apply only to cases where the diseased secretion is allowed to lodge on the spot, become dried and hard, and, consequently, a cause of considerable aggravation of the irritation, heat, &c. which belong to the disease. The influence of frequent ablutions, with warm water, and the removal of the secretions as fast as they are produced, effect a strikingly important change in its characters; and the progress of any case, under such circumstances and management, would have been more than sufficient for Dr. Willan to have founded a distinct species on, and

even warranted the impression at first sight, that it was a different disease. There is, generally, infinitely less of that fiery redness and heat: successive crops of pustules much less frequently occur, and the duration of the disease is altogether shortened.

There are five species of Impetigo spoken of by Willan and Bateman; four of which differ from each other, merely in their degree of activity and extent, circumstances which are probably entirely accidental, and dependent either on the share of irritability of skin of the individual, or the state of the digestive organs or constitution. These are the *sparsa*, *figurata*, *erysipelatodes*, and *scabida*.

In the first, denominated *I. Sparsa*, "the pustules are at a distance from each other; and the eruption extends, without any certain order, along the backs of the hands, the arms, neck, shoulders, thighs, or legs. After a few days, the pustules break, and discharge a thin humour, which gradually concretes into yellowish, laminated scabs. The cuticle, as far as the eruption extends, becomes reddish, rough, or scaly; and a slight discharge from rhagades or chops in various places, as well as from beneath the thin scabs, continues through the complaint; the duration of which, in the upper extremities, is seldom more than two

or three weeks. When the lower extremities are affected with this eruption, it continues a long time. Small yellow pustules first appear on the instep, and then on the ancle and leg, with a violent itching. They are most numerous on the foot and ancle, and when they are broken, a considerable quantity of humour issues from small pores, around which the cuticle is rough, reddish, shining, and a little elevated. The parts affected are for some weeks covered with thin scabs, but not sufficiently so to prevent the watery discharge. When the surface appears to be healed, and the scabs are about to separate, a fresh eruption of pustules often takes place, and the discharge recommences with great heat and irritation. After several returns of the eruption, ulcers are sometimes formed on the fore part, or sides of the ancle. The ulcerations discharge a clear ichor; they exhibit a considerable, but unequal cavity, and irregular edges surrounded by the pustules. In sedentary persons, who have passed the middle period of life, the edges of the ulcers are blackish, or of a purple hue, and the limbs become œdematous. The small pustules diffused over the surface are of nearly the same colour, and sometimes the intervening skin appears livid, or speckled with livid and red.

The Impetigo sparsa is most troublesome when the yellow *Psydracia* are intermixed with small irregular vesicles, as frequently happens on the upper extremities. The complaint commences about the knuckles, and spreads along the thumb and fingers to the nails; likewise along the back of the hand, and round the wrists, to the fore-arm. Both hands are usually thus affected about the same time, and the eruption extends in some cases to the bend of the elbows, the upper arm, the neck, and the cheek. It is always succeeded by a little watery discharge, and by the formation of laminated scabs: when these fall off, the cuticle beneath remains for a long time scaly and chopped, and in this state of it, fresh pustules arise, with heat, soreness, and violent tingling. Thus by repeated suppuration, and scabbing, the texture of the skin becomes, in many places, rough, harsh, and inflexible.

“This disease generally appears in autumn, and continues through the greater part of the succeeding winter. It disappears in many cases during the summer, but returns at the latter end of the year. The eruption is preceded by some disorder of the constitution, as head-ache, indigestion, and pain in the stomach, violent pains in the limbs and back,

and sometimes cramps of the lower extremities. Children, and even infants, are occasionally affected with this disease; it occurs, however, much more frequently in adults, than in children, or in persons of an advanced age. A predisposition to it is communicated hereditarily; and in those, who are predisposed, the complaint appears after intemperance, violent exercise, or exposure to sudden interchanges of heat and cold."

When the disease appears in the form of circumscribed patches of pustules of an irregular figure, and situated at a distance from each other, it answers to the description of the *I. figurata*. The hands are most frequently the seat of this more limited state of the disease, and it seems almost constantly to occur from the influence of locally irritating causes. The character and progress of the complaint are similar in other respects to that described in the foregoing quotation, though it is sometimes, from the necessary exposure of the part, rendered more tedious. The blotches do not always spread beyond the back of the hand, up the arm, or into the palm, though the pustules often occupy the interstices of the fingers at the roots of the first phalanx, and are rendered more painful and irritable by the motion of the parts, par-

ticularly if scabs are allowed to form in this situation.

The connexion of this form of Impetigo with constitutional causes is not often to be traced; and I have not been able from my own observations, or the reports of others, to confirm the remarks of Dr. Willan, of its being preceded by pains of the stomach, headache, &c. Indeed, as I before observed, I believe the greater number of cases are produced by local irritation*.

The description of the two foregoing species, or states of the disease, would comprehend, as nearly as any general description can do, the majority of cases which occur. The erysipelatous form occurring on the face being merely accidental, while the scabida is evidently that of an aggravated case from disordered general health and neglect. With respect to the species termed rodens, Dr. Bateman states, that he never had an opportunity of seeing it, and that it is probably of a cancerous nature.

Impetigo rarely comes under the eye of the

* The most intractable cases I have ever met with have been caused by the imprudent use of strong alkali to the skin, for the purpose of removing particular stains.

medical observer at its first commencement; and I am inclined to think, that, at this period, the term pustule is improperly applied to its chief feature, the fluid which the vesicles contain being transparent, though the change to opacity takes place in a few hours. The vesicles are sometimes broken at this period, when the fluid which they contain concretes on the edges of the little excavation which they occupied; and if the part be at this time minutely examined, the excavation will be found lined with this incrustation, while other vesicles are forming by the side. In this way the disease extends in a circular or other form, till a sufficient abrasion of surface is produced to furnish the materials of a scab.

In the treatment of Impetigo, the frequent removal of the diseased secretion has never been considered of sufficient importance: the benefit of this step, if carried into effect by frequent ablution of the part with warm water, is incalculable. By this plan, in conjunction with the exhibition of simple alteratives, entirely rejecting any thing in the shape of ointments, or other greasy applications, the disease will be often readily subdued. The part may be kept in a state of moisture at other times by covering it with oilskin, or by

the application of soft linen wetted in the liq. plumb. acet. dil.

If these means prove inefficacious, the Harrogate waters, or the internal exhibition of sulphur in any other form, are recommended. Plummer's pill, the decoction of dulcamara, &c. present other means of obtaining success.

On the subject of the Harrogate water, it may be proper to observe, that the custom of transmitting it in bottles to distant parts when the convenience of patients does not admit of their visiting the wells, renders it liable to some deterioration, if great care be not taken. "It loses its transparency when exposed for about two hours to the air, at first acquiring rather a green hue, and, after long standing, by transmitted light, a slight reddish colour. It gradually loses its sulphuretted taste, and then has the flavour of a strong solution of common salt. We found by experiment, that the sulphuretted hydrogen gas undergoes decomposition by exposure. The oxygen of the atmosphere unites with the hydrogen, and the sulphur is precipitated in a state of minute division, the precipitate being of a light ash colour. Hence the turbid appearance of the water. It is, however, extremely worthy of observation, that this water bottled at the spring, and imme-

diately corked and sealed, retains its gas and all its virtues for a long time *."

When benefit is expected to be derived in Impetigo from the use of local applications, the latter, as before observed, ought never to be had recourse to in the form of ointments. Independent of the difficulty of applying medicinal remedies in this form, from the slowness with which they penetrate the scabs covering the diseased parts, it is impossible to avail ourselves efficiently at the same time of the sedative effects of cold, which, particularly in the local varieties of the disease, is of the greatest importance. I have had reason, moreover, often to suppose that greasy applications, even of the simplest kind, are productive of increased irritation.

The hydrocyanic acid, a medicine which has lately made a great noise, and appeared in some instances to be of great value internally exhibited in the management of phthisical affections, was first used as an application in Impetigo by Mr. A. T. Thompson. Since the publication of Mr. T.'s paper in the columns of the Med. and Phys. Journal, I have had frequent opportunities of submitting it to a trial. When the diseased surface has been

* Scudamore, on Mineral Waters, page 9%.

diligently cleared of the scabby secretions, a lotion formed of this fluid, diluted very largely, and to which a little alcohol has been added *, is an useful application in cases where the disease is not extensive. In the present state of our knowledge respecting its power, however, it would, perhaps, not be safe to apply it to a whole limb, or to an extensively diseased surface on the trunk. It is much more efficacious in subduing the marks of irritation which exist on and surrounding the diseased spot, than any other application which I know of, if care be taken to clear away the secretions, so as to admit it directly to the diseased surface; but if the latter point be not attended to, its superiority is not so distinctly marked. It sometimes rapidly removes every vestige of the disease, but is often followed by unhealthy skin; in which case, when the patient begins to relax in its application, the disease is apt to return.

The grand and predominant features of Impetigo are extreme irritation and active inflammatory action, accompanied or followed by a proportionate degree of relaxation of the

* R. Acid. hydrocyanic ʒiij.
Aq. distill. ʒviiss.
Alcohol ʒss. ft. lotio.

vessels of the part involved. The objects in view, therefore, should be, first, to diminish such irritation, and, secondly, to supply the loss of tone which the vessels have sustained. It is evident, that mere sedative applications are not possessed of these properties conjointly, and hence arises the temporary effect only by which they are followed. The desiderata evidently consist of means which will at once relieve the turgescence and irritation, and correct the relaxed state of the vessels alluded to. It is upon these principles that the sulphur vapour bath acts in removing the disease, and its powers in such cases are unquestionable.

A very common affection of an impetiginous character, confined to the cutis of the ears, and generally most violent on their posterior surfaces, prevails among females. In the milder cases, if it be not very minutely examined, an apparently abraded state of the part, with much redness, and a slight fluid secretion, are noticed, and much itching and heat are usually complained of. If the surface is particularly examined, however, the cuticle will be found to have been partly removed by the formation of a number of minute vesicles, which have been broken down, and their contents discharged. In other cases, the small

vesicles and pustules are distinctly seen very copiously distributed, but being covered by the delicate cuticle of the part, are ruptured by the slightest roughness.

This affection is exceedingly obstinate, and does not readily yield to any application or method of treatment. Constitutional remedies, whether tending to give energy, or to produce an opposite effect, are equally uncertain as to the benefits they may be expected to produce; the disease sometimes occurring in full habits, and at others, in those of an opposite character. Common sedative washes do little good, and the only applications which have, under my notice, brought about any permanently beneficial effect, are the black lotion and the prussic acid lotion before spoken of; and sometimes where the one or the other fail in effecting a cure, they may be made use of alternately with good hopes of success. Strong cathartics, such as calomel and jalap exhibited twice a week, but not to the extent of materially reducing the strength, constitute the best part of the internal management; and as far as my observation goes, they are equally advantageous in thin and spare habits, or the opposite.

OF SCABIES.

The most common form in which Scabies makes its first appearance is that of minute vesicles, containing a transparent colourless fluid, intermixed with small papulæ, which, in a few hours, if suffered to remain undisturbed, assume the character of vesicles also. The attention is usually first directed to the part by the inordinate prevalence of the sensation from which the disease takes its name, which, leading to frequent friction and scratching, is soon followed by inflammation of the skin, and rupture of some of the vesicles, and, consequently, the fluid they contain possessing the power of infection, by the extension of the mischief to the surrounding parts.

In the lower classes of society the disease is rarely seen before it has been some time established, and has extended itself over most parts of the body. In such cases, it is most virulent and troublesome in situations well covered by clothing, or subject to friction. The trunk, margins of the arm-pits, and flexures of the joints elsewhere, usually exhibit marks of the greatest irritation; while

in more recent cases, in cleanly persons it is usually first detected about the fingers, wrists, and backs of the hands.

It is well known, that this disease is in the majority of cases produced by the direct application of the contents of the vesicles from contact with an affected person, or by handling and making use of their clothes, sleeping in the same bed, &c. It is also generated by the neglect of personal cleanliness, and inattention to frequent changes of linen, and hence has been said to prevail much among the natives of cold and mountainous countries.

When it has been of long standing, and the skin of the patient is very irritable, it often exhibits at one view the appearance of pimples, vesicles, and pustules of different dimensions interspersed; a condition, which, together with the excessive itching and irritation, will enable us readily to distinguish it from any other disease. The degree of irritability of skin, indeed, seems very much to influence the character the eruption assumes: where this property is particularly marked, rapidly running from the papular form to vesication, the vesicle in the course of a short time terminating in a change to opacity of its contents, and all the characters of a pustule of considerable size. Hence the

vulgar distinction of watery and pocky itch, which, though it does not seem to be of much practical importance, has furnished the groundwork of Dr. Willan's division into five different species.

This disease seems to be totally unconnected at its origin with any constitutional cause; but when it occurs where the system is debilitated, or the habit unhealthy, it sometimes leaves a troublesome impetiginous affection on the skin of the parts, long after its specific character has been eradicated, a state which appears to answer to the description of *S. cachectica*.

The existence of an insect in some of the vesicles and pustules of itch has been discovered in repeated instances by the assistance of good glasses, and it is therefore supposed, with apparent good reason, that the disease is the mere result of their operations in the skin. On the other hand, however, it has been maintained, that such insects are the consequences rather than the cause of the disease, and that they are not found in the majority of cases where inquiry has been instituted. The first of these opinions prevailed very generally until the publication of Dr. Bateman's work, and he has expressed his suspicions that the insect is not to be

found in all cases of the disease. He brings forward the authority of Dr. Heberden and of Baker and Canton, the two latter of whom had the advantage of great experience in the use of the microscope, in support of his opinion. Since Dr. Bateman's work was published, the subject has been several times canvassed by French pathologists; among whom, Lugol, Mourouval *, and Dr. Suriray, of Havre †, contend for the non-existence of the insect; while the experiments of Dr. Gales, the well known inventor of sulphur fumigations, seem quite conclusive in favour of the original opinion ‡. The three former have by no means adduced that weight of evidence which Dr. Gales' statement contains, and it is more than probable, that the superior opportunities of inquiry which the situation of the latter gave

* *Nouvelles Recherches et Observations sur la Gale, faites à l'Hopital St. Louis, à la Clinique de M. Lugol, pendant les années 1819, 1820, 1821, et recueillies par I. F. I. Mourouval, 1 vol. 8vo.*

† Letter to Dr. Mark, *Journal de Medecine*, Aug. 1813.

‡ The *Acarus Scabiei* is not a solitary instance of the domicile of animalculæ in the substance of the skin, and of consequent production of much irritation and disease. The *Furia infernalis* of Siberia, the Chigre and the *Dracunculus* are analogous cases. Fatal effects have arisen from each of the three latter in a variety of instances.

him, would enable him to arrive nearer the truth.

The hospital of St. Louis, in which Dr. G. was a long time resident, constantly contains a large number of cases of itch: he states, that he has examined some hundreds of the insects in question: his description of which exactly corresponds with that given by Linnæus. He has succeeded in producing the disease by confining the insect on his own skin repeatedly; and his experiments have been witnessed by some of the most eminent medical characters in Paris, who have been satisfied with the manner in which he has conducted, and with the conclusions which he has drawn from them.

A great variety of applications have been made use of in the cure of itch, notwithstanding our knowledge of a decided specific. The unpleasantness of the smell of sulphur would render it very desirable to find a substitute for it, and many trials have been made, but hitherto without effect; the undermentioned* have, however, been found sometimes

* Solutions of potash, muriate of ammonia, oxymuriate of mercury, arsenic; decoctions of hellebore, digitalis, and tobacco; sulphuric and oxygenated muriatic acid properly diluted, &c. &c.

adequate to the removal of trifling cases of the disease ; but there is no doubt, that sulphur is the safest and most expeditious remedy.

The most common form in which it is employed in this country is that of ointment ; but the recent importation of the French fumigating baths has afforded us some opportunities of avoiding the unpleasantness of this plan, and though somewhat more tedious in bringing about a cure, they are entitled to preference on account of the superior degree of cleanliness the patient is enabled to observe during the treatment.

The history of the sulphur vapour bath appears to have commenced with the experiments and researches of Dr. Gales, before referred to. The comparatively rude and unpleasant expedient of saturating blankets with the vapour, by means of a warming-pan, was first adopted, on the burning coals of which the sulphur was strewed when the vehicle was introduced into the bed, until the combustion was complete. The patient was then directed to enter it naked, and was covered up to the throat. Seven repetitions of this process in as many nights was found to be adequate to the cure ; and it seems probable, that in very delicate habits, or in the

cases of pregnant women, it is entitled to preference over the vapour-bath at present in use.

The vapour of the sulphur is unquestionably the agent by which the cure is brought about, and there seems as little doubt that the destruction of the insect constitutes its *modus operandi*. Dr. Horn, of Berlin, and Dr. de Carro, of Vienna, appear to have been next to Dr. Gales in the use of the bath. Subsequently to these, Mr. Wallace, of Dublin, has published his observations; and step by step, by the joint improvements or suggestions of the observers, the instrument, from having been inconvenient and uncomfortable to the patient, is now become not only an important and decided remedy of great value in many cutaneous diseases, but an absolute luxury as regards the patient's feelings.

The number of fumigations necessary to the cure of Scabies differs much, according to the virulence of the disease, the degree of irritability of the skin, &c.; but if the clothes of the patient be suspended in the bath during each application, which is always prudent in the cases of the lower class of people, the cure will be much expedited.

Besides the advantages of the bath already

alluded to, it is never followed by that irritation of the skin, which long continued use of the ointment is often found to produce, and which has not unfrequently led to the continuance of the remedy long after the disease has been really subdued.

OF ECZEMA.

The disease termed Eczema, as it is most frequently seen according with the general definition of Dr. Bateman, is the simple effect of the application of heat to the skin*. I am not aware that irritation applied in any other form is capable of producing an equally diffused eruption of vesicles, "with little or no inflammation round their bases;" though it is stated, on the authority alluded to, to be produced by a great variety of other irritants in persons whose skin is constitutionally very irritable.

Among the varieties as they have been termed of this disease, the most important is the *E. rubrum*, and it differs from the above

* An eruption of small vesicles on various parts of the skin, usually set close, or crowded together with little or no inflammation round their bases. Bateman's Synopsis, p. 252.

definitions in having the vesicles much closer set together, and their interstices of a bright inflammatory red colour, and also in being much more generally and extensively diffused.

In cases produced by the heat of the sun even, it should be remarked, that considerable tumefaction and heat of the parts accompanies or precedes the formation of vesicles; the definition alluded to would otherwise seem likely to lead to mistakes: it is, indeed, equally applicable to the appearances of itch, the tumefaction alluded to being at first sight the only mark of distinction.

This affection has obtained in its more formidable form, as produced by mercury, the attention of many experienced observers, from whose published remarks it appears, that though attended with much local irritation and a copious discharge from almost every part of the surface of the body, it is generally unattended with danger. It subsides according to the violence and extent of the eruption at its commencement, apparently uninfluenced by medicinal treatment in the space of from three weeks to two months.

The heat of the sun is, in delicate and irritable skins, capable of producing its more insignificant forms on the hands, neck, face, and

other exposed parts in a very short period, and, consequently, such forms prevail most among field labourers in the time of harvest. With the same state of skin, it may of course be produced by the application of heat in any other way.

It is generally, when occurring to a small extent, and from the operation of local causes, a distinctly vesicular disease; and, in a day or two, if the part be defended from heat and irritation, it usually disappears. Now and then, however, when due attention has not been paid to it, a healthy state of parts does not so speedily follow; and after it has been a little time established, the new vesicles which form are of larger dimensions, and their contents become opaque before they break, thereby giving the disease an affinity to Impetigo. When obviously produced by the heat of the sun, it has been named accordingly*; and when, from the circumstances mentioned, it approaches to Impetigo, it has received a distinguishing designation†; the understanding, however, that when occurring to a limited extent, and from the operation of local causes, that its variations of character are so minute and unessential, will be

* E. solare.

† E. impetiginodes. Bateman.

sufficient to justify us in declining the use of these terms altogether. From some experiments which I have instituted, I have no doubt that the minute vesicular form which the disease assumes, when occurring from exposure to the sun, is materially dependent on the degree of heat applied, that a blistered state of skin would occur if the heat was increased, while a minor degree of the latter would only be followed by erythematous redness: that it is therefore to be considered rather as an accidental injury, and treated on surgical principles, in a manner similar to a slight burn or scald, than to be spoken of as a disease. It is moreover a state of parts, which the abstraction of heat, by cooling sedative washes, even though the irritation may be great, will enable the efforts of nature to correct in a few hours.

The vesicular character of the disease, when it occurs on the backs of the hands and fingers from exposure to the sun, has been considered as approaching Scabies so nearly, as to be likely to lead to mistakes; and points in which dissimilitude exists, have been stated by Dr. Bateman in the work so often alluded to. The patient is, however, generally too well aware of the cause, to require to be set right on this point; but should this not be the case, the swelling and heat attending the

eczematous eruption, with the absence of the characteristic itching of scabies, will enable us to form a correct opinion. In scabies, moreover, of any standing, the vesicles are larger and more irregular in their size, and intermixed with distinct pustules, and with the scabs which form on the bases of the latter which have been ruptured by scratching.

Like most other cutaneous diseases, the eczematous eruption, sometimes by long and repeated application of the exciting cause, becomes more permanent and established, and much less ready to yield to the applications mentioned. In this state, the vessels of the part have become debilitated and relaxed by constant excitement, and the addition of a few grains of alum, or of the acetate or sulphate of zinc to the spirituous lotion, will be found necessary. This form of application is generally more useful in those cases which approach to the impetiginous character than any other. The use of ointments, or any other kind of greasy application, cannot be too much condemned.

When Eczema is produced by mercury, the patient is first made sensible of the approaching disorder by a feeling of burning heat, itching and tingling extending over the greater part of the body, but more par-

ticularly severe in the flexures of the joints on the inner surface of the thighs, in the groins, and about the pubes and axillæ. A considerable degree of roughness of the skin of these parts speedily follows, with a deep inflammatory redness, not at first unlike that of scarletina. On the second day, the roughness is increased, and is easily observed to be produced by an immense number of minute vesicles, pretty regular in their size, and distributed closely and equally upon the parts particularly mentioned. On the third day, the more exposed parts are also covered in a like manner with vesicles, containing a transparent fluid, while those previously formed on the thighs, groin, &c. begin to turn opake and milky. On the fourth, many of these latter break, and the disordered surface is covered by a copious exudation of viscous fluid, having an unpleasant odour, with which the linen is speedily imbued and stiffened; the latter, in this state, adding to the unpleasantness of the situation of the patient, by further irritating the parts with which it comes in contact. On the fifth day, the cuticle desquamates in large patches over the greater part of the body; the inner surface of the thighs, as well as the groins, scrotum, and margins of the axillæ, are quite

raw, and covered with the same fluid. There is much pain attending every attempt to change the position, and the smarting is excessively severe on the groins and thighs, if the patient attempts to extend himself; the most easy position being that in which the knees are kept considerably elevated.

The only marks of constitutional derangement commonly distinguishable, are a weak and quickened pulse, and a slightly furred tongue. The patient usually complains of weakness, but his appetite is not impaired. The bowels are regular, and the urinary secretion not much affected.

This state of things continues for many days, a succession of new vesicles continuing to appear wherever patches of unimpaired cuticle remain, till the greater part of the cutis has been denuded. In those situations which have been particularly noticed as favourable to the disease, the newly formed cuticle on the recently abraded and inflamed surface is soon elevated and destroyed by more minute and delicate vesicles, which are ruptured in a few hours after their formation, and spots where the disease appeared to have subsided, are thus again found perfectly denuded, and pouring out the same discharge as others. The protracted character which

the disease assumes arises from these continued interruptions of the formation of new cuticle, and it not unfrequently happens, that this structure, in a new and delicate state, is destroyed and re-produced repeatedly, in the course of twenty-four hours.

As the disease begins to subside, the quantity of fluid secretion gradually diminishes: the latter, however, appears to mix with, and half dissolve the ill-formed and delicate cuticle; and at this period, and under these circumstances, scales of considerable thickness, and fissures of corresponding depth are produced, from the latter of which the discharge is kept up, while along their course much pain and irritation continues to be felt. Repeated exfoliations of this mixture of cuticle and diseased secretion continues, till as the inflammatory action subsides, the first is more perfectly formed, and obtains its original strength and flexibility.

It has already been stated, that the duration of this affection is uncertain. It may even, though occasioned by mercury, be very limited in extent, and cease in a few days; and I have not seen a case even occurring in the most plethoric and healthy states of system, (and it is in such that it shows itself most formidably) continue longer than five

weeks, though the formation of solid unbroken cuticle may not be effected for a much longer period.

The foregoing description applies most particularly to the more formidable species of the disease produced by mercury; to a much more limited extent, and in a milder form, it is not unfrequently produced by opium, antimony, bals. copaibæ, &c.; in which instances, the contents of the vesicles rarely become opaque, but are absorbed in a day or two, without rupturing the cuticle, being only followed by slight exfoliations of scurf.

Dr. M'Mullin* has divided the disease into three different stages. The first of these, however, consists of a train of constitutional symptoms by no means occurring in the majority of cases, and the Doctor himself observes, that "whilst the eruption is making its appearance in one place, another part may have arrived at its most advanced form, so that all the different stages may be present at one time in the same individual;" an observation which has been made by all who have had opportunities of seeing the disease. The accompanying remarks, that it is attended with typhus through its entire course, and that it is the

* Ed. Med. and Surgical Journ. vol. ii.

peculiar effect of mercury, have not been by any means confirmed by subsequent inquiry, as may be seen by referring to Dr. Rutter's * and Dr. Chisholm's † papers on this subject, as well to Dr. Moriarty's Tract ‡.

From the facts which have been recorded, it appears that it is only when the strength of the patient has been originally not very great, and when debility has been brought on by excessive discharge, that typhoid symptoms occur. Under these circumstances only is danger to be apprehended ; as in such a state of things diarrhoea has occasionally come on, which has resisted every description of remedy, and ultimately destroyed life.

Sometimes, as observed by Dr. Rutter, a state of inflammation of the nares, trachea, and bronchiæ, form important features of the disease, which will of course add much to the danger of the case when combined with the debilitated condition described ; this, however, is only of accidental occurrence, and does not, in a great majority of cases, rise to such a height as to attract much attention.

* Med. and Physical Journal, vol. xxi., and Ed. Med. and Surg. vol. v.

† Ibid. vol. viii.

‡ A Description of Mercurial Lepa, 1804.

A large proportion of the cases which have been recorded have occurred after the appearance of catarrhal symptoms, while the system was under the influence of mercury; and hence has arisen the opinion, that it is produced by taking cold under such circumstances: but, as it has been justly remarked by Dr. Spens, this accident is much too common to justify us in supposing that nothing else is necessary to the production of the disease, while the latter occurs in numerous instances where symptoms of catarrhal affection, or any other obvious disorder have not made their appearance. Such an opinion was, however, we are informed, held by Dr. Gregory, Dr. M'Mullin, and others, on the grounds above stated; but the weight of evidence adduced is directly in favour of the conjecture, that previous idiosyncrasy must have existed.

In the treatment of this disease it will now and then happen, that though the bowels may be sufficiently open, the state of tongue and secretions may make it desirable to have recourse to a mercurial alterative; or this medicine may require to be speedily renewed to meet the exigencies of the case, where the patient is afflicted with syphilis. It would therefore be desirable to ascertain the pro-

priety of this step, and probable risk attending it, of bringing back, and re-establishing the eczematous eruption. It appears to have been done in one or two instances without any mischief of this kind occurring; but in other cases, much aggravation of the inflammation, and fresh crops of vesicles have been immediately produced. So susceptible, indeed, is the constitution sometimes found, that the smallest portion of mercury exhibited internally was injurious; and in one instance recorded by Dr. Crawford*, even the application of ung. hydr. nitr. to a tender part was followed by a return of the disease with its original violence. On the whole, it would seem advisable to refrain from the use of mercury in any form, except under circumstances of the greatest emergency.

There is no evidence in the cases to which I have referred, as to the precise state of system under the influence of mercury, in which the attack has commenced, and it is probable, that in the greater number of instances, the eruption appears where no previous disorder of the system has been effected. That it does often occur simultaneously with catarrhal fever, is unquestionable, but it is a matter of

* Ed. Med. and Sur. Journal, vol. xvi.

doubt whether the latter may stand in the situation of cause or effect; for it may be just as reasonable to suppose that the catarrhal symptoms arise from the extension of the cutaneous inflammation constituting the disease along the membranes of the nares, trachea, and bronchiæ, as that these symptoms, with their accompanying fever, produce the eruption. In a case lately under my notice, the subject of which was a stout, muscular, healthy man, no trace of disorder existed at the period of the attack, and he went through a disease of two months' duration without the slightest appearance of any of the symptoms alluded to.

Dr. Bateman's plate 57 * appears to bear a great similarity to some cases of the affection which I have noticed under the head of *Impetigo* *, and I have reason to think it is the same disease in a more aggravated form than usual. Neglect of cleanliness, or preternatural irritability of skin, are at all times fully adequate to the production of greater variations than between the plate in question and the description referred to.

In the treatment of *Eczema Mercuriale*, sufficient attention does not appear to have

* Page 349.

been directed hitherto to the use of the warm bath. In the case described by Dr. Marcet*, it seems to have been efficacious, not only in allaying the irritability of skin at the time, but in preventing so frequent a return of the disease as the patient had been previously subject to. At any period of the disease, this measure will be productive of much advantage, in lessening the irritation, and relieving the surface of its turgescence, in removing the fluid adhesive secretion, and making the patient infinitely more comfortable. If repeated twice a day, for three or four successive days, it has appeared to lessen the duration of the complaint very materially; the secretion on the surface being much reduced in extent, and the formation of healthy cuticle being thereby much earlier accomplished.

The occasional use of mild saline aperients, and confinement to an unirritating, but nutritive diet, with softly sponging the most tender parts occasionally with warm water, constitute all that is necessary or useful in the treatment of the disease, beyond the use of the bath. If the irritation is so great as to disturb the patient's rest, the use of opiates may be necessary, and do not

* Med. Chir. Transactions, vol. ii.

appear objectionable. When, at the termination of the disease, the state of system requires tonics, it is not of so much importance what kind may be employed; but if the strength is so much exhausted before the discharge has ceased as to require such medicines, those which are chosen should be of the simplest and most unirritating kind.

CONCLUDING REMARKS.

In the arrangement of the preceding pages for the discussion of *cutaneous diseases*, I have thought myself justified in omitting to notice several affections which have been by others considered to form important parts of this branch of pathology. Some of these are comparatively insignificant, and do not satisfactorily come under the denominations I have employed at the heads of the different sections of the work; while others obtain their chief importance from their connexion with, and dependence on, important and sometimes formidable constitutional disease, the treatment of which is solely directed by the existing constitutional symptoms.

Diseases of the latter description, such as

small-pox, measles, scarlatina, varicella, &c. may be also, with propriety, omitted, on another ground, viz. the elaborate notice they have obtained from different authors of established reputation and talent.

ERYSIPELAS, also, though it has been considered and treated as a cutaneous disease, is by no means classed with propriety among diseases, the mass of which so unfrequently involves the lives of the patients. It is not confined to inflammation of the cutis, even in the most trifling cases, but involves the cellular membrane beneath to a considerable extent and depth, as well as other deep seated structures. It is moreover a matter of great uncertainty, whether the cutis is primarily affected, or whether the mischief fails to be rendered manifest in the substance of this structure, till long after inflammation has been established in the parts beneath.

ELEPHANTIASIS, also, which is a disease distinctly originating in the cellular membrane, I have excluded, for the same reason as erysipelas. The molluscum, of which Dr. Bateman has furnished a plate, is, as I am informed, an affection of which no other instance has been recorded; its history and pathology, therefore, has received no additions since the publication alluded to.

Among the affections of least importance,

and which do not come under the heads of the foregoing sections, are the varieties of Erythema and Roseola. With respect to the former of these, though the variations in figures of the inflamed surface have given foundation for distinctive designations in the classification of Dr. Willan*, it may be fearlessly stated, that it is of no independent importance, and for the most part merely entitled to notice as symptomatic of derangement of the digestive organs. This admission indeed is distinctly made in the observations appended to the description of each of the variations alluded to both by Willan and Bateman.

The symptomatic inflammation of the skin would be much better understood in the form of a general description. Such description would be divested of that multiplicity of terms which has been so conducive to confusion and intricacy in the works of the authors last mentioned, and it may be effected in a very few words, so as to answer all practical purposes.

The affection in question, whatever may be the form (with one exception) which it may assume, whether consisting of red patches

* 1 E. fugax, 2 læve, 3 marginatum, 4 papulatum, 5 tuberculatum, 6 nodosum.

of an irregular form and short duration ; whether with a smooth shining surface, or having papulæ distributed on it ; whether with an irregular and defined margin without elevation, or in the form of slightly elevated tubercles ; requires no external applications, nor can be with propriety interfered with, except through the medium of the constitution.

The erythema nodosum is a singular disease, and in its character nearly allied to those cases of purpura which occur in apparently healthy states of system, the pathology of which I have endeavoured to investigate in a former page. The same high degree of derangement of the secretions, and disordered state of those organs in which the process of chyliification is carried on, has been noticed in repeated instances where the disease has come under my observation.

The inflammation appears "on the fore part of the legs, and is preceded by slight febrile symptoms for several days. It shows itself in large oval patches, the long diameter of which is parallel with the tibia ; these slowly rise into hard and painful protuberances, and as regularly soften and subside in the course of eight or nine days, the red colour turning blue, as if the leg had been bruised."

I have seen the erythema nodosum in children, as well as in grown persons, equally distinctly attended with, and dependent on, the disorder mentioned. In a recent instance, two children who had been placed out at nurse were the subjects of it; the febrile irritation had been pretty severe, and the cutaneous disorder had appeared in the second two or three days after it was discovered in the first. In both cases, after the redness began to die away, a tuberculous hardness and thickening of the cutis and cellular membrane continued for many days, evidently produced by sanguineous effusion into the cellular membrane, during the continuance of the inflammatory action. These cases gave rise, at the commencement, to the suspicion of contagion; but the similarity of the manner of feeding the two children, with that of the history of the previous state of their bowels, cleared up the question. They both rapidly recovered under the free use of purgatives of calomel and jalap, but the blue spots were some weeks in disappearing.

On the subject of Roseola, what has been written may be summed up in a few words. Like simple Erythema, it is generally found dependent on some disorder of system, and is to be considered as an effort of nature to mi-

tigate or prevent more important internal disorder.

By *Roseola* is meant "a rose-coloured efflorescence, variously figured, without wheals or papulæ, not contagious, sometimes accompanied by sensations of tingling and itching." It is distributed on the face, neck, and upper extremities, when only partial, rather more frequently than on other parts, but sometimes spreads over the greater portion of the cutaneous surface. If symptoms of febrile irritation, as is sometimes the case, usher in the efflorescence, such symptoms are mitigated by it, and eventually die away as the redness subsides. The rose-colour, from which it takes its name, is not that in which it appears at first, but seems rather to be the result of diminished inflammation: as the form in which it is at first observed is of a much brighter red. Sometimes, like *Erythema*, the redness is diffused; at others, it assumes the forms of rings and spots; while in others again, irregular lines of a darker colour have their interstices filled up by a lighter shade of red. These variations have been represented in the plates of Dr. Willan, under distinguishing appellations.

Rose-coloured rashes seem to be peculiar to no age or sex, but are, on the whole, more

frequent among infants and children than others. Preternatural irritability of skin, with a similar state of constitution, lead to its frequent appearance, in some from the most trifling exciting causes.

The colouring of the plates of Dr. Willan and Dr. Bateman is, in some copies which I have seen, so deficient, as to present no variation of shade between this affection and Scarlatina; but the distinction between the two diseases is very considerable, and essentially depends on this point. A due consideration of the co-existent symptoms will enable us to clear up any doubts which may arise.

As in Erythema, no local treatment is generally found necessary; but in such case as that inserted by Dr. Willan, communicated by Dr. Currie, of Chester *, where the disease returned annually, and continued from March to October, it would become a matter of necessary consideration.

When the rash appears in connexion with the variolous and vaccine disease, it has been named by Dr. Willan accordingly. It is generally supposed, under such circumstances, that the more important disorder is rendered milder by it.

* Willan, on Cutaneous Diseases, page 438.

VENEREAL ERUPTIONS, or those diseases of the skin which are produced by the poison of syphilis, have been recently pronounced to assume no other form than that of scales; the advocates of this doctrine having discovered that the papular or pustular eruptions heretofore appearing under circumstances of suspicion, and characterised as syphilitic, only make their appearance in connexion with, or subsequent to, sores not entitled to such character, or to simple gonorrhœa. Mr. Carmichael, whose opportunities of observation have been of no ordinary kind, has supported this opinion with facts and remarks; which, from the immense importance of the question, ought to be duly weighed and examined by every medical practitioner who has the interest of the profession and of society at heart.

According to Mr. C., the true syphilitic chancre or bubo is followed, as a secondary symptom, by Lepra or Psoriasis. The line of distinction between these two affections, even when dependent on other causes, is sufficiently indistinct, and when occurring from syphilis, probably still more so; hence the propriety of the general designation proposed of "*scaly venereal disease*" is obvious. The following

description from the pages of Dr. Willan is that of the diseases in question. "Circular patches, which resemble those of the *Lepra nigricans* in size and colour, but which are not incrustated. The dryness and harshness of the skin, so remarkable in the *Lepra vulgaris* and *alphoides*, do not occur in the venereal *Lepra*; its patches, when somewhat advanced, being as soft and pliable as other parts of the skin. It is, however, proper to observe, that every patch originates from a small, hard, reddish protuberance. As this gradually dilates, the increase of its circumference is not attended with an increasing elevation at the centre: on the contrary, the sides of the patch are sometimes raised, and the central part of it appears a flat surface covered with thin white scales. The patches are generally distinct, and at a distance from each other: I have seldom seen any of them exceeding the size of a shilling; yet it is probable they might acquire a greater magnitude, if the progress of the disease were not early arrested by the use of mercury. When the constitution is under the full influence of this remedy, the sides of the patch shrink and become paler; the centre is also depressed, but the desquamation proceeds slowly; and the disease cannot be removed without a per-

severance in the course for six or eight weeks. A circular red spot usually appears for some time in the place of every declining patch, and a minute shallow depression, like a cicatrix, is left at the centre; but no permanent discoloration of the skin remains, as in some other cases. The leprous form of the syphilis takes place, like other venereal eruptions, at very different periods after infection in different cases. If no medicines were employed, it would at length terminate in ulcerated blotches."

The description of the syphilitic Psoriasis, page 153 of the same author, is as follows: "An eruption which very much resembles the Psoriasis guttata, differing from it only by a slighter degree of scaliness, and by the livid red, or dark rose colour of the patches. The patches vary in their extent, from the size of a silver penny, to that of a section of a pea, but they are not circular. They rise at first very little, if at all, above the cuticle: as soon, however, as the scales appear on them, they become sensibly elevated, and sometimes the edge or circumference of the patch is higher than the little scales in its centre. This eruption is usually seen upon the forehead and breast, between the shoulders, or in the inside of the fore-arms, in the groins, about

the inside of the thighs, and upon the skin covering the lower part of the abdomen."

Mr. Carmichael considers the above description of the "scaly venereal disease," or that cutaneous affection exclusively produced by the syphilitic virus, as correct in all its parts, and that all papular or pustular eruptions are connected with other primary diseases not venereal. Thus, to a simple primary ulcer, excoriation of the glans, and gonorrhœa, he attributes the eruption of pimples, which are attended by fever, and terminate in desquamation. When the ulcer has elevated edges, though it be not indurated, phlyzacious pustules occur, preceded by fever, and terminating in ulcers covered with thick crusts, which heal from their margin, and when the disease is on the wane, terminate in red and scaly blotches. When the primary ulcer has worn a decidedly phagedenic character, the cutaneous disease is at first tubercular, the tubercles being sometimes intermixed with spots approaching to pustules. Fever also accompanies this form of disease: many of the tubercles or pustules terminate in ulcers covered with a thick crust, which, if undisturbed, grows on the part, and assumes a conical form, its bases being surrounded with a thick phagedenic edge, pro-

ducing precisely the appearances of what has been named Rupia.

There have been several dissentient voices raised against Mr. Carmichael's opinions as above detailed, regarding both the exclusive claim of the scaly eruption to syphilitic origin, and the directness of the connexion of the papular and pustular diseases with the primary sores and affections which he has described. On the first of these points the weight of evidence is decidedly in favour of his doctrine; but some doubts may, I think, be reasonably entertained, whether a cachectic state of system may not be the sole cause of some of the eruptions he has described as connected with non-syphilitic primary disease.

The phlyzacious pustule, more particularly, seems liable to this suspicion, inasmuch as it is the form which cutaneous disease often assumes where nothing but reduced energy of system exists.

The treatment of these affections is included in the general management of other symptoms of the constitutional disorder which do not form the proper objects for consideration here.

The formidable and intractable disease, termed Lupus, has been also omitted in the foregoing pages, from the impossibility of arranging it with any other disease of the skin under a general definition. It undoubtedly originates in many cases in the structure of the cutis; but in some of the more distressing instances which have occurred, which have been termed *Noli me tangere*, the cartilages of the *alæ nasi* have certainly been primarily affected.

When Lupus makes its appearance in situations where considerable thickness of cellular membrane, or other structure intervenes between the cutis and more solid parts, it presents the character of a soft venous coloured tubercle. A few of these are found usually on the forearm and about the elbow joint. In one or two instances, the largest was discovered to have an old cicatrix from venesection in its centre. The figure of the tubercles varies, and, where there are many, some will be found oval, and others round; while others, more irregularly shaped, are evidently formed of two or three smaller tubercles joined together. They are most elevated and darkest coloured in their centre, and on being pressed and examined, feel as if they contained fluid. Their progress is extremely slow, and if cut

into much before the skin becomes broken, their internal structure is found somewhat to resemble a stringy slough, similar to that which has been described in a preceding page, as surrounding the basis of the conical scabs of Rupia, where pressure has been employed, though of a clearer white than the latter. When ulceration takes place, it is generally in or about the centre of the tubercle, and the ulcerated spot is immediately covered by a shining gummy exudation, which grows to a hardened scab in the course of a few hours. The surface of the sore seems to sink with more or less rapidity below the surrounding parts, and gradually assumes the appearance of a deep excavation, the bottom, sides, and edges of which are lined with the scab described. In this manner the disease continues to extend till the original tubercle is wasted away; when, if care has been taken to alter the state of constitution, the surface gradually assumes a healthy condition. A sensation of heat and tingling is felt during the whole course of the disease till this has been accomplished. This has been the history of several cases which have come under my notice, in all of which a cachectic state of system was evident at the commencement.

In the treatment of these cases, the state

of the stomach and bowels required for a considerable time the exhibition of mercurial alteratives. These were followed by tonics and a better regulated mode of living. The local applications consisted, while the heat and tingling continued, of poultices made with the nitrous acid lotion, and, subsequent to this, of the latter fluid by means of pledgets of lint.

Unfortunately, the result of such treatment is by no means similar where the disease once establishes itself on the face, and affects the *alæ nasi*; indeed, it does not appear that any medicinal applications which have been tried are uniformly productive of benefit. When the disease commences in the form of a superficial tubercle, the same process of destruction of the diseased cutis goes on as described above; it does not, however, stop when the tubercle is destroyed, as in the first mentioned case, but continues to spread, sometimes rapidly, at others very slowly, and now and then appears to remain stationary, or even to allow the parts to assume a more healthy and promising appearance. The latter state of things is, however, frequently deceitful, and often followed by the more rapid progress of destruction. Thus spreading in the form of ragged ulcerations, and destroying the cheeks,

lips, and alæ nasi, it obtains a terrific appearance, and has been considered of inferior importance to cancer only, because it does not affect neighbouring parts by absorption. "Ulcers of this kind differ exceedingly from one another in their degree of virulence; but they are all so far of the same nature, that arsenic in general agrees with them, and puts a stop to their progress, while they are aggravated by milder dressings *."

I have observed that this disease does not always originate in the cutis, and that when occurring on the alæ nasi, the cartilage is sometimes observed to be primarily affected. The particulars of a case of this kind have been furnished me by my friend Dr. Taylor, of Hayes.

The subject was a young and interesting female, the daughter of an artist of considerable eminence. The attention of the latter was first directed to it by the discovery of a very trifling enlargement of the right alæ, which was unattended with pain or discoloration. As the enlargement increased, medical advice was obtained, but none of the applications had recourse to appeared to be pro-

* Sir E. Home, on Ulcers, edit. 2, p. 267.

ductive of benefit, even though combined with judicious constitutional management. After a time, a speck appeared on the most dependent part, which terminated in the kind of scab described as belonging to the disease. From this period, the wasting of the cartilages went rapidly on (the sore extending over the tip to the opposite side), till the whole organ was destroyed.

General alteratives, as Plummer's pill and the decoct. sarsæ comp. are in most cases advisable, and now and then of the greatest utility, any important derangement of the digestive organs, or febrile excitement, being first removed by adequate means. If no advantage is derived from these, in combination with common sedative applications, arsenic ought to be used, both internally and externally. This valuable medicine is usually exhibited in the form of Fowler's solution; but at St. Bartholomew's hospital a different formula is employed. It is proper to increase the dose gradually, till some manifestation of tendency to disorder of the stomach and bowels occurs, when it should be entirely withheld, and purgatives, with opium substituted, till such symptoms have subsided. The form of lotion is that best adapted for external application, and I have usually em-

ployed a preparation somewhat resembling that below *. Ointments, or any other greasy applications, are highly objectionable: they appear usually to increase the heat and irritation, instead of diminishing it. The spirituous arsenical solution is, in every respect, superior to others, possessing, as it does, the specific powers of the arsenic, with the sedative properties of spirituous evaporation.

Solutions of nitrate of silver of various strength is said occasionally to do good when the arsenic fails, as also, that touching the smaller sores with caustic is occasionally followed by healthy granulations: in situations, however, where the formation of a slough is not likely to add to deformity, the free use of caustic ought to be had recourse to, as if no great disorder of constitution exists, a healthy state of parts is often speedily produced at once. The dependence on the uncertain effects of milder applications is, in many cases, followed by disappointment in

* R. Kali arsenicati, gr. iv.

Aq. menth. sativ. ℥iv.

Sp. vini tennior, ℥j. Misce et cola.

The solution alluded to for internal exhibition is but of half the strength. It is employed at the same time internally in doses of two drams three times a day.

the end, and by a greater destruction of parts than the caustic ever effects.

In the chapters on Porrigo, I have omitted the consideration of an affection so designated by Willan and Bateman, from the utter absence of any thing like disease of the cutis in any part of its progress. The affection to which I allude is distinguished by the authors in question by the name of Porrigo decalvans.

No vestige of disease is ever discoverable in this affection in the cutis of the head. The hair gradually falls off without any obvious cause, leaving spots, which exhibit a pale and shining appearance. These are perfectly divested of hair; and if the surrounding parts on which the latter is growing be shaved, they are discovered to form distinct indentations.

Pathologically speaking, the dropping off of the hair is nothing more in this affection than the result of a particular organic structure ceasing to perform its office. In the preliminary remarks to this treatise, I have endeavoured to describe the structure in question, the office of which is to secrete and nourish the hair. The falling off of the hair is the consequence of the wasting away of this structure; and though the causes of the

latter are not easily ascertained when occurring in young people in a good state of health, they are sufficiently obvious in opposite states of system, and in old age, the phenomena occurring over the whole scalp in states of great exhaustion and debility from disease in youth where general reduction of fat has been temporarily produced, and in old age, from the general removal of this substance from superficial to internal parts, a change which is much favoured by the diminished energy of circulation which comes on at this period of life.

The similarity of figure which the affected spots assume to the contagious ringworm, often leads to the confounding the affection with the latter disease. It may, however, be distinguished by the absence of redness or irritation, and by the indented appearance described.

Dr. Bateman appears to have suspected the identity of the two affections, and Dr. Willan had seen a case or two in a school where the *P. scutulata* prevailed very generally; but it is evident, from the preceding description, that the only point in which similarity exists is of little or no importance.

When the hair falls off in patches, in the manner described in children and young

people, it often grows again in time as strong as ever; but I do not believe this can be brought about, or at all expedited by any artificial means. I have seen two instances in adults, where the whole of the hair dropped off in a few weeks from the scalp, eyebrows, eyelids, &c. while the individuals were suffering from great grief and ill-health. In one of these, an endless variety of stimulant applications had been tried, with the hope of making the hair grow, but without the slightest effect. Indeed, I should be inclined to think, that if any effect at all was produced by this plan, it would be rather that of retarding than expediting the object.

THE END.

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...to grow again in time as strong
...but I do not believe you can be
...as all expended by my
...I have seen two instances
...the whole of the first dropped
...in a few weeks from the scalp, or from
...the individual's own and
...and ill health. In one
...with the hope of
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